IOWA COURT RULES

FIFTH EDITION

January 2014 Supplement



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STEPHANIE A. HOFF ADMINISTRATIVE CODE EDITOR

PREFACE

The Fifth Edition of the Iowa Court Rules was published in July 2009 pursuant to Iowa Code section 2B.5(2). Subsequent updates to the Iowa Court Rules, as ordered by the Supreme Court, are published in electronic format only and include chapters that have been amended or adopted.

The Iowa Court Rules and related court documents are available on the Internet at https://www.legis.iowa.gov/IowaLaw/courtRulesListing.aspx.

To receive e-mail notification of the publication of a Supplement to the Iowa Court Rules, subscribe at https://www.legis.iowa.gov/Subscribe/subscriptions.aspx.

Inquiries: Inquiries regarding access to the Iowa Court Rules should be directed to the Legislative Services Agency's Computer Services Division Help Desk at (515)281-6506.

Citation: The rules shall be cited as follows:

Chapter 1 Iowa R. Civ. P.
Chapter 2 Iowa R. Crim. P.
Chapter 5 Iowa R. Evid.
Chapter 6 Iowa R. App. P.

Chapter 32 Iowa R. of Prof'l Conduct
Chapter 51 Iowa Code of Judicial Conduct
All other rules shall be cited as "Iowa Ct. R."

Supplements: Supplements to the Fifth Edition of the Iowa Court Rules have been issued as follows:

August 2009	December 2010	September 2013
September 2009	February 2011	November 2013
October 2009	January 2012	December 2013
November 2009	May 2012	
December 2009	June 2012	
January 2010	August 2012	
February 2010	September 2012	
March 2010	December 2012	
May 2010	March 2013	
June 2010	May 2013	
August 2010	June 2013	
September 2010	August 2013	

January 2014 Supplement

Changes in this supplement

Rule 17.1	Amended	Rule 17.200, Forms 201 to 230 Adopted
Rule 17.100	Amended	Rule 17.300 Amended
Rule 17.200	Amended	

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Form FL-17.325:	Affidavit of Mailing Notice
Form FL-17.325:	
1'01111 FL-1/.320.	Notice of Intent to File Written Application for
E EL 17 227	Default Decree
Form FL-17.327:	Request for Relief in an Application to Modify Child
D DI 15 000	Support Only
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	Child Support Only

CHAPTER 17 FORMS FOR SELF-REPRESENTED LITIGANTS

Rule 17.1 Use of forms; mandatory for self-represented litigants. An individual who is not represented by an attorney in a legal proceeding covered under this chapter must use forms contained in this chapter. An attorney may use these forms but is not required to do so. [Court Order May 16, 2007; December 19, 2013]

Rules 17.2 to 17.99 Reserved.

Rule 17.100 Family law forms for dissolution of marriage without minor or dependent adult children. The following forms are for use in dissolution of marriage (divorce) actions without children under the age of 18 who are children of both spouses to the marriage, or children under the age of 18 who were adopted or born during the marriage, or children 18 years of age or older who are children of both spouses to the marriage and still need support. These forms cannot be used if a spouse of the marriage is pregnant.

[Court Order December 19, 2013]

Rule 17.100—Form 101: Petition for Dissolution of Marriage with no Minor or Dependent Adult Children

Read the Guide to Representing Yourself in an Iowa Divorce Case on the Iowa Judicial Branch website before using this form.

Do not use this form if any of the following are true:

- · You are not married.
- . Neither you nor your spouse has lived in Iowa for the last year before filing this Petition.
- · Petitioner or Respondent is pregnant.
- There are children 18 years of age or older (born or
- adopted) who still need support (for example, the child is in high school or college, or is disabled).
- There are children under the age of 18 who are children (born or adopted) of both spouses before or during the marriage, even if Petitioner or Respondent is not the natural parent.

If filing electronically, you must provide any protected information in full on form 111.

 \blacksquare If filing in paper, you may use form 111 to provide any protected information in full.

	e lowa District Court for	County where you are	filing this Petition	County
III Ke	the Marriage of:			
Your cu	ırrent legal name	Your spouse 's	current legal name	
Upon	the Petition of			
		For clerk's use on	ly	
Petiti	Oner Your full name: first, middle, last		r Dissolution of or Dependent A	
and co	oncerning			
Resp	ondent Your spouse's full name: first, mide	dle, last		
	ersonal Information Fill in all in			
	d you fear for your safety, you may leave	your street address, phone		
		your street address, phone present residence:		
	d you fear for your safety, you may leave	your street address, phone present residence:	number, and email l	
	d you fear for your safety, you may leave Petitioner's (your) birth year and	your street address, phone present residence: Biri	number, and email l th year	blank. ZIP code
A.	d you fear for your safety, you may leave Petitioner's (your) birth year and Petitioner's present street address	your street address, phone present residence: Birn City () Phone number	number, and email l th year State Email a	blank. ZIP code ddress
A.	d you fear for your safety, you may leave Petitioner's (your) birth year and Petitioner's present street address County	your street address, phone present residence: Birn City () Phone number	number, and email but th year State Email a	blank. ZIP code ddress

Rule 17.100—Form 101: Petition for Dissolution of Marriage with no Minor or Dependent Adult Children, continued

2. General Information About the Marriage and the Parties A. Date and location of the marriage Month City State B. Children Check all that are true (1) There are no children under the age of 18 who are children of both Petitioner and Respondent. (2) There are no children under the age of 18 who were adopted or born during this marriage. (3) There are no children 18 years of age or older who still need support. (4) Neither Petitioner nor Respondent is pregnant. C. Petitioner's residence You cannot get a divorce in Iowa if your spouse does not live in Iowa and you have lived in Iowa for less than one year, or if you came to live in Iowa just to get a divorce. If you have questions about this, talk to an attorney. (1) The only reason that Petitioner (you are Petitioner) is living in lowa is just to get a divorce. True If you do not live in Iowa, or if you live in Iowa for reasons other than just to get a divorce, check "False." (2) Petitioner has lived in Iowa for the last _____ years and ____ months _ county. If you have always lived in Iowa, count the time since your birth. If you have been a resident of another state, count the time since you last moved to Iowa. D. Parties' residence Check each that is true (1) Petitioner has lived in Iowa for more than one year. (2) Respondent (your spouse) is a resident of Iowa. E. Condition of the marriage Check all that are true The marriage is broken and cannot be saved. (2) This is the only divorce case going on involving this marriage. If you did not check (2), explain in H. You should also talk to an attorney.

(3) This Petition is being filed in good faith for the purpose of ending the marriage

(4) Counseling will not save the marriage. If counseling may save the marriage, do not check (4).

3.

 $Rule\ 17.100 — Form\ 101:\ \textit{Petition for Dissolution of Marriage with no Minor or Dependent Adult Children}, continued$

F.	Respo	ndent's status		
	Check e	ach that is true		
	(1)	Respondent (your spouse) is in the milit If you check (1), note that there are special if your spouse is in the military. You should	rules that may prevent your case from	going forward
	(2)	Respondent is in prison or jail at	ffacility	_ in State
G.	Protect	tive or no contact order	, , , , , , , , , , , , , , , , , , , ,	
	Check o			
	(1) 🔿	There is neither a "protective order" nor Respondent (your spouse).	a "no contact order" between Petit	ioner (you) and
	(2) 🔿	There is a "protective order" or a "no co If you check (2), fill in the following information of the control of		d Respondent.
		a. County and state where the order came	e from:	
		h	County	State
		b. Court case number:		
Н.	Other i	nformation:		
Pe	titione	r's Request		
A.	Petition	ner asks the court to:		
	Check a	ll that apply. The court will only consider ite	ms that are checked.	
	(1)	End the marriage of Petitioner (you) and	d Respondent (your spouse).	
	(2)	Fairly divide the property and the debts	of the parties.	
	(3)	Order that Respondent pay the court fee	es.	
	(4)	Order that Respondent pay for Petitioner' If you check (4), you must file form 122.	s attorney's fees before the divorce i	s final.
	(5)	Order that Respondent pay spousal sup If you check (5), you must file form 122.		
	(6)	Change Petitioner's last name to:	Name can only be changed to name certificate or name used immediately to the marriage.	
		Print your former or birth name	Ü	
	(7)	Other request:		

 $\textbf{Rule 17.100} \\ \textbf{—Form 101:} \textit{Petition for Dissolution of Marriage with no Minor or Dependent Adult Children}, \textbf{continued of Marriage with no Minor or Dependent Adult Children}, \textbf{continued of Marriage with no Minor or Dependent Adult Children}, \textbf{continued of Marriage with no Minor or Dependent Adult Children}, \textbf{continued of Marriage with no Minor or Dependent Adult Children}, \textbf{continued of Marriage with no Minor or Dependent Adult Children}, \textbf{continued of Marriage with no Minor or Dependent Adult Children}, \textbf{continued of Marriage with no Minor or Dependent Adult Children}, \textbf{continued of Marriage with no Minor or Dependent Adult Children}, \textbf{continued of Marriage with no Minor or Dependent Adult Children}, \textbf{continued of Marriage with no Minor or Dependent Adult Children}, \textbf{continued of Marriage with no Minor or Dependent Adult Children}, \textbf{continued of Marriage with no Minor or Dependent Adult Children}, \textbf{continued of Marriage with no Minor or Dependent Adult Children}, \textbf{continued of Marriage with no Minor or Dependent Adult Children}, \textbf{continued of Marriage with no Minor or Dependent Adult Children}, \textbf{continued of Marriage with no Minor or Dependent Adult Children}, \textbf{continued of Marriage with no Minor or Dependent Adult Children}, \textbf{continued of Marriage with no Minor or Dependent Adult Children}, \textbf{continued of Marriage with no Minor or Dependent Adult Children}, \textbf{continued of Marriage with No.}, \textbf{contin$

4.	Attorney Help				
	Check one				
	A. An attorney did not				
		I me prepare or fill in			
	If you check B, you mu	st fill in the following in	formation:		
	Name of attorney or or	rganization, if any	Attorney's P.I.N.	# – Ask the attorne	y
	Business address of at	torney or organization	City	State	ZIP code
	()	()			
	Attorney's phone numb	her () Attorney's fa	x number – optional	Attorney's email	address – optional
6.	Check one A. O Petitioner will accept the petitioner will be petitioner will accept the petitioner will accept the petitioner will accept the petitioner will be pe	ot service of docume	nts in this case at	the mailing addre	ess below. under penalty
	in this Petition is true and	correct.			
	Signed on: Month Do	, 20	Your signature*		
	-				
	Mailing address	\overline{C}	ity	State	ZIP code
	() Phone number	Email address	Ada	litional email addre.	ss, if applicable
	* Whether filing electronically or a scan the form after signing it and		ite your signature on ti	his form. If you are fii	ing electronically,

Important Notice to Petitioner See next page for instructions for filing a Petition.

Instructions for Rule 17.100—Form 101: Petition for Dissolution of Marriage with no Minor or Dependent Adult Children, continued

Do not file these instructions

Instructions for Filing a Petition for Dissolution of Marriage

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, check the map available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, you must file electronically unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

☐ Filing your Petition electronically

- If you are filing your divorce case in a county that uses electronic filing, you must register to
 electronically file. For help with registration, see the eFiler's User Guide <u>How to Register Pro Se (Self Represented) for eFiling.</u>
- After you have registered, <u>log in to the electronic filing system</u> to electronically file your dissolution case.
- For help electronically filing your divorce, see <u>How to eFile a New Case</u>.
- With your Petition, you must also file an Original Notice (104) and a Protected Information Disclosure Form (111).
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the eFiling
 of your Petition and other documents.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My
 Filings, correct the error, and resubmit your filing. For help, see <u>How to Resubmit a Returned Filing</u>.
- Log in to your eFile account and download and print your Petition and Original Notice so that you can serve it on (deliver it to) your spouse.
- For help finding and downloading your Petition and Original Notice, please see <u>My Filings Reference</u> Guide.

Filing your Petition in paper

- If the county where you will be filing your Petition does not yet accept electronic filing, you may
 proceed in paper. If the county does accept electronic filing, you must proceed electronically, unless
 you have received permission from the court to file in paper.
- With your Petition (101), you must also file a Petition Cover Sheet (102), an Original Notice (104a), and a Confidential Information Form (103).
- Forms 101 and 104a: Make two photocopies if you can deliver copies of these forms to your spouse
 in-person or by mail. Make three photocopies if you are going to ask the county sheriff or a civil
 process server to deliver these forms to your spouse.

Note about making photocopies: You should make your photocopies before you go to the courthouse to file your papers. It is expensive to make photocopies at the clerk of court office. It is cheaper to make the copies at a business that makes photocopies or at a public library.

- Forms 102 and 103: You do not have to make photocopies of these forms.
- Take the original forms you filled in and the photocopies to the clerk of court office in your county.
 Tell the clerk at the counter you are filing a Petition for a divorce.
- Give the clerk at the counter these forms:

Instructions for Rule 17.100—Form 101: Petition for Dissolution of Marriage with no Minor or Dependent Adult Children, continued

- 101 Petition for Dissolution of Marriage (Divorce) with no Minor Children
- 102 Coversheet for a Petition for Dissolution of Marriage with no Minor Children
- 103 Confidential Information Form (Do not make copies of this form.)
- 104a Original Notice
- Pay the filing fee. If you cannot afford to pay the filing fee, prepare and file form 109.
- The clerk at the counter can tell you the amount of the filing fee. The Iowa legislature sets these fees and periodically raises them, so check with the clerk's office to confirm the current filing fee.
- The clerk of court will sign the Original Notice (104a). You will have to serve this form on (deliver it to) your spouse.
- The clerk at the counter will time-stamp each of the copies (original and photocopies).

Do not file these instructions

Rule 17.100—Form 102: Petition Cover Sheet for a Dissolution of Marriage with no Minor or Dependent Adult Children

For court use only	number	County where case is fil	led	_
Petitioner		County Whole case is fit		
Petitioner's first name	Middle name	Last name		_
Street address		City	State	ZIP code
() Phone number	Email ada	lress		
Case name Petitioner's first name	Middle name	Last name		_
VS.				
Respondent's first nar	ne Middle name	Last name		_

Note to Petitioner

- Petitioner must complete this cover sheet if filing in paper and give it to the district court clerk when filing a
 Petition for Dissolution of Marriage with no Minor or Dependent Adult Children.
- . Do not serve this cover sheet on Respondent.
- This cover sheet is for statistical purposes only. It has no legal effect in the case.
- For electronic filers: You do not have to file this form. This information is automatically generated when you submit your documents electronically.

Rule 17.100—Form 103: Confidential Information Form

This form is to be used by paper filers only.

Each party must complete one of these forms if filing in paper.

lowa Code section 602.6111 requires the parties to a case to provide the clerk of court with certain personal identification information. Each party's completed form will be kept confidential by the clerk of court.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

n	the Iowa District Court for	County where you	r case is filed
Uŗ	oon the Petition of	Equity case	no
Гһе	titioner Full name: first, middle, last spouse who files the Petition for Dissolution of Marria, d concerning		dential Information Form
	espondent Full name: first, middle, last other spouse		
1.	Petitioner's information	, ,	
	Full name: First, Middle, Last	Birth date	Social Security number
2.	Respondent's Information	1	
	Full name: First, Middle, Last	Birth date	Social Security number
3.	Information provided by:		
	Print your f	full name: first, middle, last	20
	Your signature	Month	

Important Notice:

Do not give copies of this form to anyone except the clerk of court.

Rule 17.100—Form 104: Original Notice for Personal Service

Petitioner must serve the Petition on Resp Failure to meet this deadline may result in the	e court dismissi	ng the divorce case.		
Read the <u>Guide to Representing Yours</u> for additional important instructions.	self in an Iowa .	<i>Divorce Case</i> on the I	owa Judicial I	Branch website
If filing electronically, Petition	•			
If filing in paper, Petitioner n If you do not understand how to use this j			talk to an at	tornev
1) you do not understand now to use this j	orm, or ij you	shouta use this form,	tain to an air	winey.
In the Iowa District Court for _				County
		County where Petiti	on is filed	_
Upon the Petition of		Original Not	ice for Pe	rsonal Service
Petitioner Full name: first, middle, last				
and concerning				
Respondent Full name: first, middle, las	t			
 To Respondent Named Above Petitioner (your spouse) has fil A copy of the Petition for Disso Petitioner asks for a divorce. Petitioner's contact information	olution of Mari	ivorce case:		ent.
Mailing address	City		State	ZIP code
, , ,	3.07		2000	211 10000
Phone number	Email addre	SS	-	
Important in:		er Respondent on 1	next page	Persons who are
hearing or speech impaired may call Relay lowa TTY (1 contact information available at: http://www.iowacourts.	1-800-735-2942). D	isability coordinators cann		

Rule 17.100-Form 104: Original Notice for Personal Service, continued

Instructions to Respondent

- A. You must file an Answer or a Motion with the clerk of court in the above county within 20 days after you receive this Original Notice. If you do not file an Answer or Motion within 20 days after receiving this Original Notice, the court may enter a judgment against you giving Petitioner what he or she asked for in the Petition.
- B. For help in your divorce case, and for forms that you must use if you choose to represent yourself without an attorney, visit the Iowa Judicial Branch website at http://www.iowacourts.gov/ and click on "Court Rules & Forms" or on "For the Public."
- C. If you received Petition form 101, you may use Answer form 115.
- D. This case has been filed in a county that uses electronic filing. You must register to eFile through the Iowa Judicial Branch website at https://www.iowacourts.state.ia.us/Efile and obtain a log in and password for filing and viewing documents in your case and for receiving service and notices from the court.
 - For general rules and information on electronic filing, refer to the Iowa Court Rules Chapter 16
 Pertaining to the Use of the Electronic Document Management System, available on the Iowa Judicial
 Branch website.
 - For court rules on the Protection of Personal Privacy in court filings, refer to Division VI of the Iowa Court Rules Chapter 16.
 - If you are unable to proceed electronically, you must receive permission from the court to file in paper.
 Contact the clerk of court in the county where the petition was filed for more information on being excused from electronic filing.
- E. If you electronically file your Answer or Motion, it will be served automatically on Petitioner or on Petitioner's attorney(s). A Notice of Electronic Filing (NEF) will tell you if the court has excused Petitioner from electronic filing. If the court has excused Petitioner from electronic filing, you must mail a copy of your Answer or Motion to Petitioner.

Important Notice to Respondent
You should talk to an attorney at once to protect your interests.

Rule 17.100—Form 104a: Original Notice for Personal Service

Read the <i>Guide to Representing Yourself in an</i> important instructions.	Iowa Divorce Case on the	Iowa Judicial Branch websi	te for additional
 If filing electronically, Petitioner must use If filing in paper, Petitioner must use 			
If you do not understand how to use this for		this form, talk to an attorn	eey.
In the Iowa District Court for _			County
In the lowa District Court for _	County w	here Petition is filed	Ounty
Upon the Petition of	Equi	ty case no	
Petitioner Full name: first, middle, last	Orig	inal Notice for Pe	rsonal Service
and concerning			
Respondent Full name: first, middle, las			
 A copy of the Petition for Disso Petitioner asks for a divorce. Petitioner's contact information dur 	_	Petitioner's name	
Mailing address	City	State	ZIP code
()	mail address		
2. Instructions to Responden	t Named Above		
 You must file an Answer or a Motion this Original Notice. If you do not file court may enter a judgment again. If you received Petition form 101, After you file your Answer or Motion. 	e an Answer or Motion winst you giving Petitioner wyou may use Answer for	thin 20 days after receiving what he or she asked for in m 115 .	g this Original Notice, the
(SEAL)	Clark of Car		
Important Notice to Respondent	Clerk of Cou	rt	_County Courthouse
You should talk to an attorney at once protect your interests.	to		, lowa
proteot your interests.	City		ZIP code
If you need assistance to participate in court due to a d hearing or speech impaired may call Relay lowa TTY ('contact information available at: http://www.iowacourts.	1-800-735-2942). Disability co	ordinators cannot provide lega	Persons who are all advice. Disability coordinator

November 2013 Rule 17.100—Form 104a Page 1 of 1

[Court Order November 6, 2013]

Rule 17.100—Form 105: Acceptance of Service

Petitioner must complete this section:

In the Iowa District Court for	County where Petition is filed		County
Upon the Petition of	Equity case no		
Petitioner Full name: first, middle, last	Acceptance of	of Servi	ce
and concerning			
Respondent Full name: first, middle, last			
Petitioner must file this form with the clerk of court soon	after Respondent signs it.		
Respondent must complete this section: Respondent's Acceptance of Service, O If Respondent completes this Acceptance of Service, Responding it. Petitioner will file it with the clerk of court.		² etitioner s	oon after
I, Print your name	, am Respondent in this cas	se. I rece	eived a copy
of the Original Notice and the Petition for this c I certify under penalty of perjury and pursuant t information I have provided in this Acceptance	to the laws of the State of lo	wa that t	
Signed: Month Day Year	Respondent's signature		
Respondent's mailing address	City	State	ZIP code
Phone number Email address			

Important Notice to Respondent

By signing this form, you are not agreeing to what Petitioner wants. You are only agreeing that you received a copy of the Original Notice and Petition.

November 2013 Rule 17.100—Form 105 Page 1 of 1

Rule 17.100—Form 106: Directions for Service of Original Notice

Petitioner must complete this form if the sheriff or a process server will deliver the Petition and Original Notice to Respondent.

 $Do \ not \ use \ this form \ if \ Respondent \ has \ already \ received \ the \ Petition \ and \ Original \ Notice.$

Do not file this form with the clerk of court in paper or electronically.

Give this form to the sheriff or other process server with your Petition (101) and Original Notice (104 if electronically filing or 104a if filing in paper).

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

ounty	where Petition is filed	Equity case number	_	
	ame and Location of Society one and fill in the blanks	heriff or Other Process Serve	er	
Α.	Sheriff In county where	Respondent will be served County		
B.	Street address Other process server	City	State	ZIP code
	Name of other person serv	ring the Notice		
	Street address	City	State	ZIP code
P	erson to be Served			
Yo	ur spouse 's name	Phone number		
\overline{Aa}	ldress where your spouse can be	served City	State	ZIP code
. P	erson Requesting Serv	ice		
Yo	ur name	Phone number		
\overline{Yo}	ur present mailing address	City	State	ZIP code

Continued on next page

5. Costs of Service

Rule 17.100—Form 106: Directions for Service of Original Notice, continued

	Check one	
	A. O Petitioner will pay the costs of the Sheriff If you cannot afford the costs, file form 109.	or other process server.
	B. Costs for Sheriff deferred by court order:	
	,	Clerk of court: Sign only if costs deferred by court order
6.	Notification	by court order
٠.		and namer will matify the margan
	After completion of service, the sheriff or other proceeding service.	cess server will notify the person
	. 20	
	Date signed: Month Day Year	Your signature

January 2014

Rule 17.100—Form 107: Motion and Affidavit to Serve by Publication

Petitioner: Use this form only if you do not know where your spouse lives or works.

- You must contact a newspaper that is generally distributed or circulated throughout the county where you filed the Petition.
- Ask if the newspaper will publish your Original Notice by Publication (108) in your divorce case.
- Tell the newspaper you need to publish the Notice once each week for three weeks in a row.
- If the newspaper can publish your Notice three weeks in a row, ask how much it will cost.
- Tell the newspaper you will call back to arrange for publishing your Notice after a judge gives you permission to publish your Notice in the newspaper.
- The fees for publication are set by statute in Iowa Code section 618.11.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the lowa District Court forCounty where you filed the Petition						
Upor	n the Petition of		e no			
Petiti	ioner Full name: first, middle, last		otion and Affid rve by Publica			
and c	oncerning					
Resp	ondent Full name: first, middle,	last				
1. In	formation and Requests	s				
Α.	Respondent's residence Check each that applies					
	(1) ☐ Respondent lives ou (2) ☐ Respondent's reside	itside of lowa. ence and place of employment ar	re unknown.			
В.	Respondent's last known	residence:				
	Street address	City	State	ZIP code		
	County	() Phone number	Email a	ddress		
C	. Most recent date Respond	dent is known to have been at	t the address ab	ove:		
	Month Day	, 20				

Rule 17.10	Rule 17.100—Form 107: Motion and Affidavit to Serve by Publication, continued							
D.	D. Petitioner has taken these steps to find Respondent:							
E.	Petitioner will publish notice in this newspaper:							
	Name of newspaper							
F.	Petitioner asks the court to allow Petitioner to serve Respondent by publication because Respondent cannot be personally served.							

Continued on next page

Rule 17.100-Form 107: Motion and Affidavit to Serve by Publication, continued

2.	Attorney Help Check one				
	A. An attorney did not help	o me prepare or	fill in this paper.		
	B. An attorney helped me If you check B, you must fill	prepare or fill in	this paper.		
	Name of attorney or organiz	ration, if any	Attorney's P.I.N.	# $ Ask$ the attorney	
	Business address of attorney	or organization	City	State	ZIP code
	()_ Attorney's phone number	() . Attorney's fa	x number – optional	Attorney's email o	address – optional
3.	Oath and Signature	, have	e read this Motior	n and Affidavit, a	nd I certify
	Print your name under penalty of perjury and pu have provided in this Motion ar			f lowa that the in	formation I
	Signed on: Month Day	, 20	Your signature*		
	Mailing address		ity	State	ZIP code
	() Phone number Em	ail address		itional email address	s, if applicable

^{*} Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.

Rule 17.100-Form 108: Original Notice by Publication

Petitioner should complete this form only if a judge has signed an order giving permission to publish this Notice in a newspaper.

After you take this Notice to the newspaper, promptly mail a copy of this Notice and the Petition to Respondent's last known mailing address.

Note to Petitioner: Fill in third date of publication in section 2 below.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

Newspaper: Publish only the information below this line.

n the Iowa District Court for	County where Peti	tion is filed
Upon the Petition of		no.
Petitioner Full name: first, middle, last and concerning	Origina	l Notice by Publication
Respondent Full name: first, middle, last		
Petitioner (your spouse) has filed a divo Petitioner's contact information during the spouse in the spous	orce lawsuit naming you as Res he divorce case:	spondent.
Petitioner's first name Middl	le name Last n	ame
Petitioner's present street address	City	State ZIP code
County	() Phone number	Email address
2. Respondent's deadline for filing a You must file an Answer or a Motion wit	th the clerk of court in the al	bove county within 20 days afte
Month Day Year		
3. Instructions to Respondent Name You must file an Answer or a Motion with the provided above. If you do not respond, the she asked for in the Petition.	ne clerk of court in the above c court may enter a judgment ag	ainst you giving Petitioner what he
You should talk to an attorney at once to protect If you choose not to have an attorney represent self-represented litigant information and family litigant.	t you in this matter, go to the lowa	
f you need assistance to participate in court due to a disability, learing or speech impaired may call Relay lowa TTY (1-800-7; contact information available at: http://www.iowacourts.gov/Adr	35-2942). Disability coordinators can) Persons who are nnot provide legal advice. Disability coording

Rule 17.100-Form 108: Original Notice by Publication, continued

Newspaper: only publish the instructions below if your county uses electronic filing. To determine if your county uses electronic filing, check the map available on the Iowa Judicial Branch website under "eFiling," or call the clerk of court office in your county.

- You must register to eFile through the Iowa Judicial Branch website at
 https://www.iowacourts.state.ia.us/Efile/ and obtain a log in and password to file and view documents in your case and to receive service and notices from the court.
- For general rules and information on electronic filing, refer to the Iowa Court Rules Chapter 16
 Pertaining to the Use of the Electronic Document Management System, available on the Iowa Judicial
 Branch website.
- For court rules on the Protection of Personal Privacy in court filings, refer to Division VI of the Iowa Court Rules, Chapter 16.

Rule 17.100—Form 109: Application and Affidavit to Defer Payment of Costs

Petitioner uses this form only if Petitioner cannot afford to pay the fees to file and serve the Petition.

- Use this form if it would cause you to suffer a hardship if you had to pay the filing fee and cost of serving papers.
- You may need to provide proof of your income and assets and your expenses.
- Costs and fees paid to someone other than the court or sheriff cannot be waived. For example, you may have to pay to publish a legal notice in the newspaper or to hire an expert to testify.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In t	the Iowa District Court for	County			
		County where your case is filed			
Up	on the Petition of	Equity case no.			
Pet	titioner Full name: first, middle, last	Application and Affidavit to Defer Payment of Costs			
and	d concerning				
Re	spondent Full name: first, middle, last				
1.	Request				
	A. I am Petitioner.				
	B. For my Application and Affidavit, I s Check all that apply	state that:			
	(1) I am unable to pay the filing fe	e or service costs or other court costs.			
	(2) ask the court for permission t	o proceed without prepayment of costs and fees.			
	(3) 🔲 I am filing this Application and	Affidavit in good faith.			
	(4) I believe I am entitled to what I	am asking for in this case.			
	C. Household				
	There are $\underline{\underline{Number}}$ people living in m	y household.			
	D. My household income is \$	per month. nefits before deductions for all members of your household.			
	E. My income comes from:	iojus vojore accadenoris jor an memoers of your nousenous			
		salary, wages, or benefits such as unemployment, Title 19, FIP.			

Rule 17.100—Form 109: Application and Affidavit to Defer Payment of Costs, continued

F.	My household has the	e following monthly expenses:
	(1) Rent or mortgage	\$
	(2) Utilities	\$
	(3) Phone	\$
	(4) Food	\$
	(5) Transportation	\$
G.	I have \$	in cash, checking, and savings.

Continued on next page

Rule 17.100—Form 109: Application and Affidavit to Defer Payment of Costs, continued

2.	Attorney Help Check one				
	_	ma prapara a	r fill in this nanar		
	A. An attorney did not help rB. An attorney helped me pr				
	If you check B, you must fill in				
	Name of attorney or organizat	ion, if any	Attorney's P.I.N.	# – Ask the attorr	пеу
	Business address of attorney o	r organization	City	State	ZIP code
	()_ Attorney's phone number	_ () Attornev's fo	x number – optional	Attornev's ema	il address – optiona
_					7
3.	Certification of Service by N Section 3 to be completed only if filing			npt from electroni	c filing.
	This document, if filed electronically, v				<i>y</i> 0
	l,	, cer	tify that on		, 20
	•				
	I mailed or gave a copy of this Appli	cation and Affi	davit to the other p	arty or the other	party's attorney
	at this address:				
	N C 1 1 1 1 1	.1 1			
	Name of person to whom I delivered or	mailed it			
	Doub. In our officer william of June 1			State	ZIP code
	Party's or attorney's mailing address	City	V	State	ZIF Code
4.	Oath and Signature				
	I,	_, have read t	his Application an	d Affidavit, and	l certify under
	Print your name				
	penalty of perjury and pursuant to			at the information	on I have
	provided in this Application and Af	fidavit is true	and correct.		
	. 20)			
	Signed on: Month Day	Year You	ır signature*		
	Mailing address	City	v	State	ZIP code
	()				
	Phone number Email	address	Ada	litional email addr	ess – if available
	* Whether filing electronically or in paper,		rite your signature on t	his form. If you are	filing electronically
	scan the form after signing it and then file	г елеси описану.			
No/	vember 2013	Rule 17.10	0—Form 109		Page 3 of

Rule 17.100—Form 110: Affidavit of Service of Original Notice and Petition for Dissolution of Marriage

This form is used only if someone other than Petitioner (you), a sheriff, or a process server delivered a copy of the Petition and Original Notice to Respondent (your spouse).

- The person, other than Petitioner, who gave the Petition and Original Notice to Respondent, fills in this form.
- Petitioner, or the person who gave the Petition and Original Notice to Respondent, must file this form with the clerk of court.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

n	the lowa District	Court fo	·	County where	Petition is filed		County	
Jþ	on the Petition o	f		Equity	case no			
Pe	titioner Full name: firs	t, middle, last		_ Af	fidavit of Ser Notice and	l Petitio	n for	
ın	d concerning				Dissolution	i Oi iviai	riage	
₹€	spondent Full name	e: first, middle,	last	-				
- .	Affidavit			I				
	1,			, delivered	I a copy of the	Original	Notice and	
	I,Name of person – o	Cannot be Pe	titioner, sheriff,	or process server		- · · J · · · · ·		
	Petition for Dissolution of Marriage for th			s case to:			Check one	
							O a.m.	
			on		. 20	at	p.m.	
	Name of Respondent		Mon	th	\overline{Day} , \overline{Ye}	ar Tin	ne	
	by handing Respon	dent copi	es of the att	ached papers				
	gp	. ш. с. п. с. с. р. п.		action pulpore.				
	Oath and Signature							
	To be completed by the person who gave the Petition and Original Notice to Respondent.							
	I,, have read this Affidavit of Service, and I certify							
	Print your name							
	under penalty of pe	under penalty of perjury and pursuant to the laws of the State of lowa that the information I						
	have provided in th	have provided in this Affidavit of Service is true and correct.						
			20					
	Signed on: Month	- Dav	_, 20 Year	Your signature	·*			
	0	,		0				
	Mailing address			City		Charta	ZIP code	
				City		State	ZIF code	
	Maning address							
	()							
	Phone number	\overline{E}	mail address		Additional	email addi	°ess – if available	
	()Phone number		mail address			email addi	ress – if available	
	Phone number * If you are filing electron			gning it and then f		email addi	ess – if available	

[Court Order November 6, 2013]

Rule 17.100—Form 111: Protected Information Disclosure

It is the responsibility of counsel, if any, and the parties to ensure that protected information is omitted or redacted from documents or exhibits filed with the court. The clerk of court will not review filings to determine whether the required omissions or redactions have been made. For electronic filers, see division VI of Chapter 16 of the Iowa Court Rules. For paper filers, see Iowa Rule of Civil Procedure 1.422.

Use this form to identify the full version of any protected information redacted in other documents you have filed.

■ If filing electronically:

- Petitioner must complete this form (111) and file it with the Petition (101) and Original Notice (104).
- Respondent must complete this form if adding or correcting protected information.
- Paper filers also may use form 111 to assist in complying with Iowa Rule of Civil Procedure 1.422.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for	County		
	ounty where the case is filed		
Upon the Petition of	Equity case no		
Petitioner Full name: first, middle, last	Protected Information Disclosure		
and concerning			
Respondent Full name: first, middle, last			

For electronic filers:

A. Name

When protected information, as defined in lowa Court Rule 16.602, is required by law to be included or is material to the case and must be included in non-confidential documents, a party shall include the protected information on this form.

For an explanation of a filer's responsibility and the procedures to use for protecting personal information, refer to lowa Court Rules: Chapter 16, Rules Pertaining to the Use of the Electronic Document Management System, Division VI, Protection of Personal Privacy. Rule 16.602 provides the list of protected information. Rule 16.604 provides a list of information that may be redacted.

1. Petitioner The spouse who filed for divorce.

Provide the complete version of protected information and the redacted version included in documents you file.

First	Middle	Last
Protected Information Type	Complete Informatio (See Rules 16.602 and 16.604	
(1) Social security number	 XXX-XX-XXXX	Last four digits only
(2) Financial account numbers	Full account number	Partial account number only
(3) Date of birth	/ / mm/dd/yyyy	Year only
(4) Individual taxpayer identification numbers	 XXX-XX-XXXX	Last four digits only

Rule 17.100-Form 111: Protected Information Disclosure, continued

(5) Personal identification numbers	Full number	Partial only
(6) Other unique identifying numbers	Full number	Partial only
(7)		
Additional protected information	Full information	Partial information
(8)		
Additional protected information	Full information	Partial information
(9)		
Additional protected information	Full information	Partial information
(10)		
Additional protected information	Full information	Partial information

2. Respondent *The spouse who did not file for divorce.*

Provide the complete version of protected information and the redacted version included in documents you file.

A. Name		
First	Middle	Last
Protected Information Type	Complete Information (See Rules 16.602 and 16.604	
(1) Social security number	 XXX-XX-XXXX	Last four digits only
(2) Financial account numbers	Full account number	Partial account number only
(3) Date of birth	/ / mm/dd/yyyy	Year only
(4) Individual taxpayer identification numbers	 XXX-XX-XXXX	Last four digits only
(5) Personal identification numbers	Full number	Partial only
(6) Other unique identifying numbers	Full number	Partial only
(7)		
Additional protected information	Full information	Partial information
(8)		
Additional protected information	Full information	Partial information
(9)		
Additional protected information	Full information	Partial information
(10)		
Additional protected information	Full information	Partial information

Check this box if you are attaching a separate sheet listing additional information for Respondent.

[☐] Check this box if you are attaching a separate sheet listing additional information for Petitioner.

Rule 17.100—Form 111: Protected Information Disclosure, continued

_		4.		
-2	Intorm	STION	nrauda	A h
J.	HHIVIII	auvii	provide	u vv.
				, .

		/S/			
Handwritten signature of party completing this form or attorney if filing in paper			signature of par if filing electro	ty completing this nically	form
Law firm, if applicable		-			
Mailing address	City		State	ZIP code	
() Phone number					
Email address		Additional em	ail address, if ap	pplicable	
Month Day Day	<u>Year</u>				

Rule 17.100—Form 115: Answer to Petition for Dissolution of Marriage with no Minor or Dependent Adult Children

Respondent must file an Answer within 20 days after receiving the Petition and Original Notice, or the court may enter a judgment against Respondent giving Petitioner what he or she asked for in the Petition.

Use this Answer form 115 if you received Petition form 101, otherwise use form 116.

Read the Guide to Representing Yourself in an Iowa Divorce Case on the Iowa Judicial Branch website before using this form.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (111).

n the Iowa District Court for	where your spouse filed the Peti.	Cou	
Jpon the Petition of	Equity case no		
Petitioner Your spouse's full name: first, middle, last and concerning	Answer to Petition to of Marriage with Dependent Adu	no Minor or	
Respondent Your full name: first, middle, last			
(1) Petitioner's (your spouse's) birth year (2) Petitioner's birth year and present res		ect in the Petition.	
The correct information is:		tition.	
Birth year Present street address	City Ste		

		Present street address	ī	City		State	ZIP code
		Country	()		Email a	11
_	•	County		none number	41 D41-		aaress
		Information Abou		rriage and	the Parties	5	
Α.	Date a	and location of the m	arriage				
		one graph 2A of the Petition	(form 101) i	is not correct,	check (2) and fi	ll in the blan	ks.
	(1)) The date and location					
	(2)) The date and location		_			
		The correct informat					
				_,			
		Month	Day	Year	City		State
B.	Childr	en					
		all that are true					
	_	do not check one or more	-	-			
	(1)			_			
	(2)	There are no childrer	n under the a	age of 18 who	were adopted	or born durir	ng this marriage.
	(3)	There are no childrer	•	•		support.	
	(4)	Neither Petitioner no	r Respondei	nt is pregnant.			
C.		ner's residence					
	(1) Tr	ne only reason that Pe	etitioner (yo	ur spouse) is	living in lowa i	s just to get	a divorce.
	\mathcal{C}) True					
	C) False <i>If you do not l</i> divorce, check	ive in Iowa, o t "False."	or if you live in	a Iowa for reaso	ns other than	just to get a
		an	ranh 2C(2)	of the Petition ((form 101), fill i	n the blanks.	
	(2) <i>If</i> j	vou disagree with parag	1 upi 20(2) 0	,	, , ,		
		vou disagree with parag etitioner has lived in lo					3

Continued on next page

 $Rule\ 17.100 - Form\ 115: Answer\ to\ Petition\ for\ Dissolution\ of\ Marriage\ with\ no\ Minor\ or\ Dependent\ Adult\ Children,\ continued$

D.	Parties' residence
	Check each that is true
	(1) Respondent (you are Respondent) is a resident of lowa.
	(2) Petitioner (your spouse) has lived in lowa for more than one year.
	If you did not check (1) or (2) , you should talk to an attorney.
E.	Condition of the marriage
	Check all that are true
	(1) The marriage is broken and cannot be saved.
	(2) This is the only divorce case going on in involving this marriage. If you did not check (2), explain in 2I. You should also talk to an attorney.
	(3) Petitioner did not file the Petition in good faith for the purpose of ending the marriage.
	$(4) \ \ \square \ \ \text{Counseling will not save the marriage.} \ \textit{If counseling may save the marriage, do not check} \ (4).$
F.	Respondent's status
	Check each that is true
	(1) Respondent (you are Respondent) is in the military service.
	If you check (1), note that there are special rules that may prevent this dissolution from going forward if you are in the military. You should talk to an attorney.
	(2) Respondent is in prison or jail at in
	If you are in prison or jail, you may be entitled to a "guardian ad litem," a person, usually an attorney, appointed to protect the interests of a spouse in some cases.
G.	Protective or no contact orders
	Check one
	(1) There is neither a "protective order" nor a "no contact order" between Respondent (you) and Petitioner (your spouse).
	(2) O There is a "protective order" or "no contact order" between Respondent and Petitioner.
	If you check (2), fill in the following information:
	a. County and state where the order came from:
	County State
	b. Court case number:
Н.	Respondent denies anything in the Petition that Respondent has not agreed is correct.
I.	Other information:

Continued on next page

 $Rule\ 17.100 - Form\ 115: Answer\ to\ Petition\ for\ Dissolution\ of\ Marriage\ with\ no\ Minor\ or\ Dependent\ Adult\ Children,\ continued$

3. Respondent's Request

A.	Respondent asks the court to: Check all that apply. The court will only consider i	tems that are checked.				
	If you do not know what you want, talk to an attorn	ey.				
	(1)					
	(2) Fairly divide the property and the debts of the parties.					
	(3) Order that Petitioner pay the court fee	S.				
	(4) Order that Petitioner pay for Responder If you check (4), you must file form 122.	t's attorney's fees before the divorce is final				
	(5) Order that Petitioner pay spousal support of you check (5), you must file form 122.	ort (alimony) to Respondent.				
	(6) Change Respondent's last name to:	Name can only be changed to name on birth certificate or name used immediately prior to the marriage.				
	Print your former or birth name					
В.	Other request:					

 $Rule\ 17.100 - Form\ 115: Answer\ to\ Petition\ for\ Dissolution\ of\ Marriage\ with\ no\ Minor\ or\ Dependent\ Adult\ Children,\ continued\ Adult\ Children,\ Continued\ Adult\ Children,\ Continued\ Children,\ Children$

••	Attorney Help Check one								
	$\overline{}$) An attorney	did not he	ln me nren	are or i	fill in this na	ner		
	$\tilde{}$	An attorney				-	por.		
	🔾	If you check B	-						
		Name of attor	ney or organ	nization, if any	v	Attorney's P.	.I.N. # – As	sk the attor	ney
		Business addr	ess of attorn	ey or organiz	ation	City		State	ZIP code
		()	7	(7	. 44	,	ail address – option
_				Attorn	iey's fax	number – optio	nal Atto	rney's emo	atl address – option
5.		ce Instructi							
	If Resp	pondent is fill	ing in pape	er					
	_				al a		44	l-l 1:	-4
	\sim	-	•				-		sted above; or
	В. ()	Respondent	: will accept	service of c	docume	ents in this ca	ise at the i	mailing ad	ddress below.
	Section	6 to be complete	ted only if fil	ing in paper o	or if the i	other narty is e	ovomnt fron	n electronic	e filing.
	This do	cument, if filed	,	y, will automo	atically i	be served on re	egistered po	arties.	
	This do	your name		y, will automo	atically i _, certif	be served on re y that on	egistered po onth	arties. ————————————————————————————————————	, 20
	I, Print I maile addres	your name ed or gave a ess:	copy of this	s Answer to	atically in a certification of the ot	be served on re y that on	egistered po onth	arties. ————————————————————————————————————	
	I, Print I maile address	your name ed or gave a ess: f person to who	copy of this	s Answer to	atically in the ot	be served on re y that on	egistered po onth	arties. Daj	y 7ear attorney at this
7	This doo	your name ed or gave a ess: f person to who or attorney's m	copy of this	s Answer to	atically in a certification of the ot	be served on re y that on	egistered po onth	arties. ————————————————————————————————————	, 20
7.	This doo	your name ed or gave a ess: f person to who or attorney's ne	copy of this om I delivered aailing addre	s Answer to	atically i atically i i , certiforther the other constant i	be served on rely that on	onth the other	nrties. Dag party's a	, 20 Year attorney at this
7.	This door	your name ed or gave a ess: f person to who or attorney's ne	copy of this om I delivered aailing addre	s Answer to	atically i atically i i , certiforther the other constant i	be served on rely that on	onth the other	nrties. Dag party's a	y 7ear attorney at this
7.	This door I, Print I maile address Name of Party's Oath I, Print of perj	your name ed or gave a ess: f person to who or attorney's m and Signat	copy of this om I delivered nailing addre	s Answer to	atically in a certification of the other of the other of the other of the other of the certification of the certif	y that on rely that on rely that on Monday Monday or Monday or read this Ar	onth the other	Tarties. Day Party's a State	, 20 Year attorney at this
7.	This door I, Print I maile address Name of Party's Oath I, Print of perj	your name ed or gave a ess: f person to who or attorney's m and Signat your name ury and purs	copy of this om I delivered nailing addre	s Answer to	atically in a certification of the other of the other of the other of the other of the certification of the certif	y that on rely that on rely that on Monday Monday or Monday or read this Ar	onth the other	Tarties. Day Party's a State	, 20 Year attorney at this ZIP code
7.	This doo	your name ed or gave a ess: f person to who or attorney's m and Signat your name ury and purs	copy of this om I delivered nailing addre	s Answer to	atically in a certification of the other of	y that on rely that on rely that on Monday Monday or Monday or read this Ar	onth the other	Tarties. Day Party's a State	, 20 Year attorney at this ZIP code
7.	This doo	your name ed or gave a ess: f person to who or attorney's m and Signat your name ury and purs Answer is tru	copy of this om I delivered nailing addre	s Answer to	atically in a certification of the other of	y that on Andrews of lower than on Indiana.	onth the other	Tarties. Day Party's a State	, 20 Year attorney at this ZIP code
7.	This doo	your name ed or gave a ess: f person to who or attorney's m and Signat your name ury and purs Answer is tru on: Month	copy of this on I delivered nailing addressure uant to the ue and cor	s Answer to	atically in a cartiful a , certiful a , certiful a the other a the other a , have a State a	read this Ar of lowa that	nswer, an	Tarties. Day Tarty's a State Ind I certify Tarty Tarty's a	, 20, 20attorney at this ZIP code under penalty have provided

Instructions for Rule 17.100—Form 115: Answer to Petition for Dissolution of Marriage with no Minor or Dependent Adult Children, continued

Do not file these instructions

Instructions for Filing an Answer to a Petition for Dissolution of Marriage

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, check the map available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, you must file electronically unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

■ Filing your Answer electronically

- If your divorce case was filed in a county that uses electronic filing, you must register to electronically
 file. For help with registration, see the eFiler's User Guide <u>How to Register Pro Se (Self Represented)</u>
 for eFiling on the Iowa Judicial Branch website.
- Scan the signed Answer form and save it as a .pdf. (Save it in a place that will be accessible to you
 when you electronically file.)
- Log in to EDMS on the Iowa Judicial Branch website and file your Answer.
 The login page can be accessed from two different paths: you may <u>directly log in to EDMS</u>; or from the judicial branch website menu, you may select "eFiling > eFile (EDMS) Login."
- For help, see How to eFile to an Existing Case.
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the eFiling of
 your Answer and other documents. You can then open the Answer and print a copy for your records.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My
 Filings, correct the error, and resubmit your Answer. For help, see <u>How to Resubmit a Returned Filing</u>.
- The NEF will indicate if your spouse is exempt from electronic filing requirements, in which case, you must
 mail or serve in paper a copy of the document on your spouse if he or she does not have an attorney.

Filing your Answer in paper

- Make two photocopies of the original.
- Take your original Answer form and the photocopies to the clerk of court's office in the county where
 the Petition was filed. The county is listed at the top of the Petition (form 101).
- · The clerk will time-stamp your forms and copies.
- The clerk will take the original and give the copies back to you.
- · Keep one of the copies for your records.
- Serve one of the copies of your Answer on your spouse (Petitioner).
- You can hand one of the copies of the Answer form to your spouse, or mail a copy to your spouse at the address shown on the Petition.
- If your spouse has an attorney, you should serve the Answer by mailing a copy to the attorney at the attorney's address on the Petition if box 5B on the Petition is checked.

Do not file these instructions

January 2014

Rule 17.100-Form 116: General Answer to a Petition

Respondent must file an Answer within 20 days after receiving the Petition and Original Notice, or the court may enter a judgment against Respondent giving Petitioner what he or she asked for in the Petition.

If the Petition you received is on form 101, use form 115 for your Answer.

Read the <u>Guide to Representing Yourself in an Iowa Divorce Case</u> on the Iowa Judicial Branch website before using this form.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (111).
- If filing in paper, you may use form 111 to provide any protected information in full.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for	County where Petition is filed
Upon the Petition of	Equity case no
Petitioner Your spouse's full name: first, middle, last	General Answer to a Petition
and concerning	
Respondent Your full name: first, middle, last	

- 1. Respondent's Answer You are Respondent.
 - A. Respondent admits that the following paragraphs in the Petition are true:

List the numbers of the paragraphs in the Petition that you think are true. If you decide later that the paragraphs you list here are not true, it may be too late to change your answer.

- B. Respondent denies that the following paragraphs in the Petition are true:
- C. Respondent does not know whether the following paragraphs in the Petition are true: List the numbers of the paragraphs in the Petition that you are not sure about. If you cannot say a paragraph or a part of a paragraph is true or not true, it may be because you do not know how something, such as a date, place, or when something happened.

Rule 17.100-Form 116: General Answer to a Petition, continued

Charles and						
Check one						
(1) 🔿			Respondent (you) and			
(2)	The	ere is a "protective order" or "no contact order" between Responder	nt and Petitioner.			
_	If y	ou check (2), fill in the following information:				
	a.	County and state where the order came from:				
		County	State			
	b.	Court case number:				
Respo	nde	ent denies anything in the Petition that is not admitted in th	is Answer.			
Other i	nfo	rmation:				
	Respo	Per (2) The If y a. b.	Petitioner (your spouse). (2) There is a "protective order" or "no contact order" between Responde If you check (2), fill in the following information: a. County and state where the order came from: County			

2. Respondent's Request If you do not know what you want, talk to an attorney.

Respondent asks the court to: Write here what you would like the court to do. For example, tell the court if you want a divorce. Be brief. Do not write long descriptions.

3. Attorney Help

Rule 17.100—Form 116: General Answer to a Petition, continued

	Name of attorney or organize	ation, if any	Attorney's P.I.N.	#-Ask the attorn	неу
	Business address of attorney	or organization	City	State	ZIP code
	()_ Attorney's phone number	() . Attorney's fa	x number – optional	Attorney's ema	il address – option
Serv	ice Instructions	, ,	•	,	•
	spondent is filing in paper				
Check					
A. (Respondent will accept s	service of docu	ments at the attor	rney's address	listed above; o
в. С	Respondent will accept s			-	
				a	
	fication of Service by 15 to be completed only if filing			nt from electronic	filina
Decuo.	i o de completea onty ij jiting	in puper or ij ine	omer party is exem	pi jrom electronic	jung.
This d	ocument, if filed electronically,	will automatically	be served on registe	ered parties.	
This d	ocument, if filed electronically,	will automatically	be served on registe		20
This d	ocument, if filed electronically, t your name	will automatically	be served on registe		, 20 <u>Year</u>
This d	ocument, if filed electronically, t your name	will automatically , cert	be served on register ify that on Month	Day	
This d	ocument, if filed electronically, t your name ed or gave a copy of this h	will automatically , cert	be served on register ify that on Month	Day	
I, Prin	ocument, if filed electronically, t your name ed or gave a copy of this h	will automatically , cert	be served on register ify that on Month	Day	
I, Prin I mail addre	ocument, if filed electronically, t your name ed or gave a copy of this h	will automatically, cert Answer to the o	be served on register ify that on Month	Day	
I, Prin I mail addre	ocument, if filed electronically, t your name ed or gave a copy of this theses:	will automatically, cert Answer to the o	be served on register ify that on Month	Day	
I,	ocument, if filed electronically, t your name ed or gave a copy of this theses:	will automatically, cert Answer to the o	ify that on Month other party or the	Day	
This d	tyour name ed or gave a copy of this tess: of person to whom I delivered of sor attorney's mailing address	will automatically, cert Answer to the correct or mailed it	ify that on Month other party or the	other party's a	ttorney at this
In I mail address	ocument, if filed electronically, t your name ed or gave a copy of this h ess: of person to whom I delivered of	will automatically, cert Answer to the corr mailed it	ify that on	other party's a	ttorney at this
This d I,	ocument, if filed electronically, it your name ed or gave a copy of this ress: of person to whom I delivered or sor attorney's mailing address and Signature	will automatically, cert Answer to the corr mailed it	ify that on Month other party or the	other party's a	ttorney at this
This d	t your name ed or gave a copy of this tess: of person to whom I delivered of sor attorney's mailing address and Signature	will automatically	ify that on	other party's a State	ttorney at this ZIP code under penalt
This d I,	t your name ed or gave a copy of this tests: of person to whom I delivered of sor attorney's mailing address and Signature it your name	Answer to the control of the control	ify that on	other party's a State	ttorney at this ZIP code under penalt
This d I,	t your name ed or gave a copy of this tess: of person to whom I delivered of sor attorney's mailing address and Signature	Answer to the control of the control	ify that on	other party's a State	ttorney at this ZIP code under penalt
Inail address Name Party Oath I,	et your name ed or gave a copy of this ress: of person to whom I delivered of a copy of this ress: and Signature t your name rjury and pursuant to the lass Answer is true and corre	Answer to the control of the State ct, 20	e read this Answee	other party's a State	ttorney at this ZIP code under penalt
This d I,	et your name ed or gave a copy of this ress: of person to whom I delivered of a copy of this ress: and Signature t your name rjury and pursuant to the lass Answer is true and corre	Answer to the control of the control	ify that on	other party's a State	ttorney at this ZIP code under penalt
This d I,	t your name ed or gave a copy of this tests: of person to whom I delivered of a copy of this a c	Answer to the common of the State of the Sta	e read this Answer of lower signature*	other party's a State er, and I certify e information I h	ttorney at this ZIP code under penalt
This d I,	et your name ed or gave a copy of this ress: of person to whom I delivered of a copy of this ress: and Signature t your name rjury and pursuant to the lass Answer is true and corre	Answer to the common of the State of the Sta	e read this Answee	other party's a State	ttorney at this ZIP code under penalt

Instructions for Rule 17.100-Form 116: General Answer to a Petition, continued

Do not file these instructions

Instructions for Filing an Answer to a Petition for Dissolution of Marriage

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, check the map available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, you must file electronically unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

□ Filing your Answer electronically

- If your divorce case was filed in a county that uses electronic filing, you must register to electronically file.
 For help with registration, see the eFiler's User Guide <u>How to Register Pro Se (Self Represented) for eFiling</u> on the Iowa Judicial Branch website.
- Scan the signed Answer form and save it as a .pdf. (Save it in a place that will be accessible to you when
 you electronically file.)
- Log in to EDMS on the Iowa Judicial Branch website and file your Answer.
 The login page can be accessed from two different paths: you may <u>directly log in to EDMS</u>; or from the judicial branch website menu, you may select "eFiling > eFile (EDMS) Login."
- For help, see <u>How to eFile to an Existing Case</u>.
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the eFiling of
 your Answer and other documents. You can then open the Answer and print a copy for your records.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My
 Filings, correct the error, and resubmit your Answer. For help, see <u>How to Resubmit a Returned Filing</u>.
- The NEF will indicate if your spouse is exempt from electronic filing requirements, in which case, you must
 mail or serve in paper a copy of the document on your spouse if he or she does not have an attorney.

Filing your Answer in paper

- Make two photocopies of the original.
- Take your original Answer form and the photocopies to the clerk of court's office in the county where
 the Petition was filed. The county is listed at the top of the Petition (form 101).
- The clerk will time-stamp your forms and copies.
- The clerk will take the original and give the copies back to you.
- · Keep one of the copies for your records.
- Serve one of the copies of your Answer on your spouse (Petitioner).
- You can hand one of the copies of the Answer form to your spouse, or mail a copy to your spouse at the address shown on the Petition.
- If your spouse has an attorney, you may serve the Petition by mailing a copy to the attorney at the
 attorney's address on the Petition if box 5B on the Petition is checked.

Do not file these instructions

Instructions for Rule 17.100—Form 116

Page 1 of 1

[Court Order May 16, 2007; November 6, 2013]

Form 117 to Form 121: Reserved

November 2013

Rule 17.100—Form 122: Motion in a Dissolution of Marriage with no Minor or Dependent Adult Children

Use this form if you want to ask the court to do something after your court case has already started.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for	County where your case is filed		
Upon the Petition of	Equity case no.		
Petitioner Full name: first, middle, last	Motion in a Dissolution of Marriage with no Minor or Dependent Adult Children		
and concerning			
Respondent Full name: first, middle, last			
 B. Respondent I. Request A. I ask the court to Check all that apply. If you check any box in A, y (1) Change the hearing date that has been seen as a constant. 	• •	making this re	equest in B. _, 20
 (2)	ne divorce is final. o me before the divorce is final	Day I.	Year
B. I am making the request(s) in this Motion	on because:		

2. Attorney Help

Rule 17.100—Form 122: Motion in a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

is Motion, at the inform	ther party's at	TIP code TIP code TIP code
is Motion, a	ther party's at	TIP code TIP code Inder penalty of this provided in this
is Motion, a	ther party's at	ttorney at this ZIP code
is Motion, a	ther party's at	ttorney at this ZIP code
is Motion, a	ther party's at	ttorney at this ZIP code
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	ther party's at	ttorney at this
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on		v Your
		, 20
rty is exempt d on registere	t from electronic red parties.	e filing.
– optional	Attorney's emo	nil address – optic
		ZIP code
		-
y 's P.I.N. #		•
	– optional	State - optional Attorney's emo

Rule 17.100-Form 123: Response to a Motion

Use this form if your spouse has filed a Motion (most likely form 122) and you disagree with what your spouse is asking the court to do in that Motion.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the lowa District Court for	County where your case is filed
Upon the Petition of	Equity case no
Petitioner Full name: first, middle, last	Response to a Motion
and concerning	
Respondent Full name: first, middle, last	
why you disagree with the request in C. (1) Change the hearing date that h (2) Order counseling (conciliation). (3) Set a hearing date for a divorce (4) Award my spouse attorney's fe	that apply. If you check any box in B, you must tell the court has been set for ${Month}$, ${Day}$, ${Year}$ be Decree by default. The estimates before the divorce is final.

Rule 17.100—Form 123: Response to a Motion, continued	
C. I disagree with the Motion because:	

Rule 17.100-Form 123: Response to a Motion, continued

3.	Attorney Help Check one			
	A. An attorney did not help me prep	pare or fill in this pane	r	
	B. An attorney helped me prepare of		1.	
	If you check B, you must fill in the follo	wing information:		
	Name of attorney or organization, if an	y Attorney's P.I.N. ‡	# $ Ask$ the attorney	,
	Business address of attorney or organiz	zation City	State	ZIP code
	() ()		1 11
	Attorney's phone number Attorn	ney's fax number – optional	Attorney's ema	!l address – optional
4.	Section 4 to be completed only if filing in paper of This document, if filed electronically, will autom	or if the other party is exe natically be served on regi.	stered parties.	
	I,	_, certify that on	D	, 20
	Print your name I mailed or gave a copy of this Response			
	Name of person to whom I delivered or mailed it Party's or attorney's mailing address	City	State	ZIP code
5.	Oath and Signature			
	I,	_, have read this Res	ponse, and I cert	ify under
	penalty of perjury and pursuant to the law		that I have read t	his Response
	and that the information I have provided in			
	Signed on: Month Day Year	Your signature*		
	Mailing address	- City	State	ZIP code
	()			
	Phone number Email address	Ac	lditional email addr	ess – if available
	* Whether filing electronically or in paper, you must scan the form after signing it and then file electron	, ,	this form. If you are j	filing electronically,
Nov	/ember 2013 Rul	le 17.100—Form 123		Page 3 of 3

Rule 17.100—Form 124: Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children

Caution: This form may require you to provide protected or sensitive information. Each party must complete one of these forms.

- 💂 If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (111) if you have not already done so.
- If filing in paper, you may use form 111 to provide any protected information in full if you have not already done so.

If you do not understand how to use this fo	orm, or if you	u should use this for	m, talk to an attorney.	
In the Iowa District Court for		County where	your case is filed	County
Upon the Petition of		Equity ca	ase no	
Petitioner Full name: first, middle, last			inancial Affidavit f Dissolution of Marri With no Minor o	iage
and concerning	Dependent Adult Children			
Respondent Full name: first, middle,	last	-		
Check one A. O Petitioner B. O Respondent I, Print your name of my assets, debts, ar 1. Assets Things you and your spond A. Real estate Attach additional sheets if neces *Owner (Whose name is on the o	ise own. sary.	income as of the relation $R = Re$	espondent J=Joint (Both	, 20 Year
Type of real estate	Owner*	Market value What it would sell for	Debt Total amount you still owe on it and to whom owed	Net value Market value minus debt owed
(1) Homestead Address		\$	\$ to:	\$
(2) Other real estate Address		\$	\$ to:	\$

Check this box if you have attached a sheet with additional information on other assets.

Rule 17.100—Form 124: Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

B. Vehicles

Includes cars, trucks, motorcycles, and other motorized vehicles.

*Owner (Whose name is on the car or vehicle title?): P = Petitioner R = Respondent J = Joint (Both)

Vehicles Make (e.g. Ford) Year	Owner*	Market value What it would sell for	Debt Total amount you still owe on it and to whom owed	Net Value Market value minus debt owed
(1)		\$	\$	\$
		Ψ	to:	Ψ
(2)		\$	\$	\$
		5	to:	Ψ
(3)		\$	\$	\$
		Ψ	to:	Ψ

Check this box if you have attached a sheet with additional information on other vehicles.

C. Securities, stocks, & bonds

*Owner (Whose name is on the securities, stocks, or bonds?):

P = Petitioner R = Respondent J = Joint (Both)

Securities, stocks, & bonds Company name	Owner* P,R,J	Market value What it would sell for	Debt Total amount you still owe on it and to whom owed	Net value Market value minus debt owed
(1)		\$	\$	\$
(1)		Ψ	to:	Ψ
(2)		\$	\$	\$
(2)	Φ	to:	Ψ	
(2)		\$	\$	\$
(3)		Φ	to:	Φ

Check this box if you have attached a sheet with additional information on other securities, stocks, & bonds.

D. Life insurance

*Owner (Whose name is on the policy?): P = Petitioner R = Respondent J = Joint (Both)

Life insurance Company name	Owner* P,R,J	Cash value Not death benefit	Loan from cash value Total amount still owed on loan	Cash value Minus loan owed
(1)		\$	\$	\$
(2)		\$	\$	\$
(3)		\$	\$	\$

[☐] Check this box if you have attached a sheet with additional information on life insurance.

Rule 17.100—Form 124: Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

E. Bank accounts

*Owner (Whose name is on the checking or savings account?): P = Petitioner R = Respondent J = Joint (Both)

Checking & savings accounts Bank or Credit Union name If you do not use bank accounts, write "Cash"	Owner*	Cash value	Personal loans or overdraft accounts Total amount you still owe on it	Net value Cash value minus loan / overdraft owed
(1)		\$	\$	\$
(2)		\$	\$	\$
(3)		\$	\$	\$

Check this box if you have attached a sheet with additional information on other checking & savings accounts.

F. Household

*Owner: P = Petitioner R = Respondent J = Joint (Both)

Household contents Describe	Owner*	Market value What it would sell for	Debt Total amount you still owe on it and to whom owed	Net value Market value minus debt owed
(1) Furniture			\$	•
a.		\$	to:	\$
b.		\$	\$	\$
D.		Ψ	to:	ý
C.		\$	\$	\$
C.		Ψ	to:	y .
d.		\$	\$	\$
d.		,	to:	y .
(2) Appliances / Electronics		\$	\$	\$
a.		\$	to:	ý
b.		\$	\$	\$
D.		Ψ .	to:	Ψ
C.		\$	\$	\$
C.		Ψ	to:	J
d.		\$	\$	\$
ч.		<u> </u>	to:	•
(3) Other contents		\$	\$	\$
a.		Ψ	to:	Ψ

Rule 17.100—Form 124: Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

b.	\$	\$ to:	\$
C.	\$	\$ to:	\$

Check this box if you have attached a sheet with additional information on other household assets.

G. Retirement assets

*Owner (Whose name is on the retirement account?): P = Petitioner R = Respondent J = Joint (Both)

Retirement assets Examples: Pensions, IRAs, 401(k)s, annuities, etc.	Owner*	Market value What it would sell for	Loan from retirement account Total amount you still owe on it and to whom owed	Net value Market value minus loan owed
(1)		\$	\$ to:	\$
(2)		\$	\$ to:	\$
(3)		\$	\$ to:	\$

Check this box if you have attached a sheet with additional information on other retirement assets.

H. Other assets

Items not listed in the other boxes should be listed here. For example: jewelry, furs, guns, sporting goods, farm animals.

*Owner: P = Petitioner R = Respondent J = Joint (Both)

Other assets Describe	Owner*	Market value What it would sell for	Debt Total amount you still owe on it and to whom owed	Net value Market value minus debt owed
(1)		\$	\$	\$
	•	to:	•	
(2)		\$	\$	\$
(2)		Φ	to:	Ψ
(2)		¢	\$	¢
(3)		\$	to:	\$

Check this box if you have attached a sheet with additional information on other assets.

Rule 17.100—Form 124: Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

Totals

(1) Total from attached sheets	Listed in 1A-H.	\$
(2) Total net value of assets	Listed in 1A-H.	\$

2. Other Debts Debts may include things such as past due balances on utilities, money owed to a landlord for damages after moving, credit card debt, and loans from friends, family, or banks.

*Whose debt is it? P = Petitioner R = Respondent J = Joint (Both)

Other debts List only those not included as "debt" or "loans" under "Assets" in part 1.	Whose debt?*	Amount owed
(1)		\$
(2)		\$
(3)		\$
(4)		\$
(5)		\$
(6)		\$
(7)		\$
(8)		\$
(9)		\$
(10)		\$
(11)		\$
(12)		\$
(13)		\$
(14)		\$
(15)		\$
Check this box if you have attached a sheet with additional information on other debts, and enter the total.		\$
Total other debts Including amounts shown on attached sheet, if any.		\$

Rule 17.100—Form 124: Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

3. Income and Deductions

A. Petitioner's Income and Deductions If you are Respondent, give your best estimate for each amount.

*How often is income paid or deduction taken?

 $W = Weekly \ B = Bi$ -weekly (every other week) $M = Monthly \ T = Two times a month$

Current income and deductions	Income		Ded	uctions
for Petitioner Sources of income and deductions	How often paid?* W,B,M,T	Gross amount Before deductions	How often taken?* W,B,M,T	Amount of deduction
(1) Wages from employer Employer name: Job title:		\$		\$
(2) Wages from employer Employer name: Job title:		\$		\$
(3) Unemployment assistance		\$		\$
(4) Family Investment Program		\$		\$
(5) Social Security		\$		\$
(6) Other Identify:		\$		\$
(7) Other Identify:		\$		\$
(8) Other <i>Identify:</i>		\$		\$
(9) Totals from attached sheets, if any Check this box if you have attached a sheet with additional information on Petitioner's income and deductions.		\$		\$
Totals Current income and deductions for Petitioner		\$ Income total		\$ Deductions

 $Rule\ 17.100 - Form\ 124: \textit{Financial Affidavit for a Dissolution of Marriage with no \textit{Minor or Dependent Adult Children}, continued to the property of the$

B. Respondent's Income and Deductions If you are Petitioner, give your best estimate for each amount. *How often is income paid or deduction taken?

 $W = Weekly \ B = Bi$ -weekly (every other week) $M = Monthly \ T = Two \ times \ a \ month$

	In	come	Ded	uctions
Current income and deductions for Respondent Sources of income and deductions	How often paid?* W,B,M,T	Gross amount Before deductions	How often taken?* W,B,M,T	Amount of deduction
(1) Wages from employer Employer name: Job title:		\$		\$
(2) Wages from employer Employer name: Job title:		\$		\$
(3) Unemployment assistance		\$		\$
(4) Family Investment Program		\$		\$
(5) Social Security		\$		\$
(6) Other <i>Identify:</i>		\$		\$
(7) Other <i>Identify:</i>		\$		\$
(8) Other <i>Identify:</i>		\$		\$
(9) Totals from attached sheets, if any Check this box if you have attached a sheet with additional information on Respondent's income and deductions.		\$		\$
Totals Current income and deductions for Respondent		\$ Income total		\$ Deductions total

4. Expenses

A. Living arrangements

Check one
(1) My spouse and I live in the same home.
(2) My spouse and I do not live in the same home.

Rule 17.100—Form 124: Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

B. My expenses

Note: You must complete this section if you or your spouse wants spousal support (alimony). *How often paid?: $W = Weekly \ B = Bi$ -weekly (every other week) M = Monthly T = Two times a month A = Annually

Type of expense	Paid to	How often paid?* W,B,M,T,A	Monthly payment
(1) House payment or rent			\$
(2) Food At home & restaurants			\$
(3) Transportation (gas, bus fare) Not car loan payments – see (12).			\$
(4) Clothing			\$
(5) Medical, dental Not health insurance payments – see 4B(10).			\$
(6) Utilities (gas, electric)			\$
(7) Phone			\$
(8) Cable / satellite television / internet			\$
(9) Car insurance payment			\$
(10) Health insurance payment			\$
(11) Credit card payments			\$
(12) Car loan payments			\$
(13) Other loan payments			\$
(14) Other expense Identify:			\$
(15) Other expense Identify:			\$
(16) Other expense Identify:			\$
(17) Totals from attached sheets, if any Check this box if you have attached a sheet with additional information on your expenses.		,	\$
Total expenses			\$

 $Rule\ 17.100 - Form\ 124: \textit{Financial Affidavit for a Dissolution of Marriage with no \textit{Minor or Dependent Adult Children}, continued and the property of th$

5.	Attorney Help Check one			
	A. An attorney did not help me pre	pare or fill in this	paper	
	B. An attorney helped me prepare		•	
	If you check B, you must fill in the foll		•	
	Name of attorney or organization, if a	ny Attorney'.	s P.I.N. # $-$ Ask the attor	ney
	Business address of attorney or organ	ization City	State	ZIP code
	()		
	Attorney's phone number Attor	rney's fax number – o	otional Attorney's em	ail address – optional
	Certification of Service by Mailing Section 6 to be completed only if filing in paper This document, if filed electronically, will autor 1, Print your name I mailed or gave a copy of this Financia attorney at this address: Name of person to whom I delivered or mailed Party's or attorney's mailing address Oath and Signature 1, Print your name	r or if the other party matically be served of, certify that on al Affidavit to the of it	n registered parties. Month Da	y , 20 Year er party's
	under penalty of perjury and pursuant to Financial Affidavit and that the information $\frac{1}{Signed\ on:\ Month}$ $\frac{1}{Day}$, $\frac{20}{Year}$	Your signature*		
	Mailing address	City	State	ZIP code
	()			
	Phone number Email address	S	Additional email add	ress – if available
	* Whether filing electronically or in paper, you mus scan the form after signing it and then file electron		ure on this form. If you are	filing electronically,
Nov	rember 2013 Ri	ule 17.100—Form 124		Page 9 of 9

Rule 17.100—Form 125: Affidavit of Mailing Notice

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for	County where your case is filed
Upon the Petition of Petitioner Full name: first, middle, last and concerning Respondent Full name: first, middle, last	Equity case no. Affidavit of Mailing Notice
1. Attorney Help Check one A. An attorney did not help me prepar B. An attorney helped me prepare or f If you check B, you must fill in the followin Name of attorney or organization, if any Business address of attorney or organization	fill in this paper. ng information: Attorney's P.I.N. # – Ask the attorney
() () State 21P code 's fax number – optional Attorney's email address – opt

Important Notice to Petitioner

Petitioner **must** file this if he or she served Notice by Publication in a newspaper and asks the court for a divorce Decree by default. Petitioner **must** also complete the oath and signature section on the next page.

Petitioner's Oath and Signature on next page

Rule 17.100—Form 125: Affidavit of Mailing Notice, continued

Petitioner's Oath and Signature				
1,, Print your name	certify under pen	alty of perju	ry and p	oursuant to the
laws of the State of lowa that on the ${Day}$	day of <i>Month</i>	, 20 Yea	, I se	nt by ordinary
mail with proper postage, the following pa	aper or papers:			
Original Notice and Petition for Dissolu	ution of Marriage, o)r		
Notice of Intent to File a Written Applic	cation for Default D	ecree		
to Respondent's last-known address as f				
Respondent's street address	City		State	ZIP code
Signed on: Month Day Year	Petitioner's signat	ure*		
Mailing address	City		State	ZIP code
Phone number Email address		Additional e	mail addi	ress – if available
* Whether filing electronically or in paper, you must h scan the form after signing it and then file electronic		e on this form.	If you are	filing electronically,

Rule 17.100—Form 126: Notice of Intent to File Written Application for Default Decree

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court		ounty where your case is filed		County
Upon the Petition of		Equity case no		
Petitioner Full name: first, middle,	, last	Notice of Inten Application for		
and concerning				
Respondent Full name: first, m	iddle, last			
To:				
To: Respondent's first name	Middle name	Last name		
Date of Notice:		20		
Month	Day,	Year		
	Important Notice	e to Respondent:		
Handwritten signature of Petitioner if filing in paper The person who provided the signa	r or attorney of	if filing electronically	^D etitioner or	Attorney
Present street address (If attor	ney, firm address)	City	State	ZIP code
		•		
() Phone number	 Email addi	ress	_	
Instructions for Petitioner				
☐ Filing your Notice elec	tronically			
•	•	ss Respondent is exempt from	electronic	
Filing your Notice in p	aper (if you have rece	eived permission from the cour	t to file in pa	aper)
 Deliver a copy of this f Complete form 125 and File the original of this Keep a copy for your re 	d file the original at the form (126) at the clerk	e clerk of court's office.		
November 2013	Rule 17.	100—Form 126		Page 1 of ²

Rule 17.100—Form 127: Request for Relief in a Dissolution of Marriage with no Minor or Dependent Adult Children

Caution: This form may require you to provide protected or sensitive information.

Use this form only if you have filed a Petition for Dissolution of Marriage (101) and:

- Your spouse (Respondent) did not file an Answer, or
- Your spouse will not work with you to prepare a Settlement Agreement (128).
 - If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (111) if you have not already done so.
 - ffiling in paper, you may use form 111 to provide any protected information in full if you have not already done so.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for	County where your ca	se is filed	County		
Upon the Petition of	Equity case no)			
Petitioner Full name: first, middle, last	of Marri	age with no			
and concerning	Береп	Dependent Adult Children			
Respondent Full name: first, middle, last	-				
1. Personal Information Fill in all information and you fear for your safety, you may leave your of	tion that you know. If you address, phone number, a	have been assa nd email blank.	ulted by your spouse		
l am					
Check one					
A. O Petitioner					
B. Respondent					
(1) Petitioner's birth year and present	t residence:				
Petitioner's present street address	City	State	ZIP code		
County	() Phone number	— Email a	ddraee		
•	2 110110 1101110 01	Emaita	aar ess		
(2) Respondent's birth year and pres	Birth ye	rar			
Respondent's present street address	City	State	ZIP code		
County	() Phone number	Email a	ddress		

 $Rule\ 17.100 - Form\ 127: \textit{Request for Relief in a Dissolution of Marriage with no \textit{Minor or Dependent Adult Children}, continued and the property of the$

2.	Re	quest	for Relief
	A.	Childre	n Check all that are true
		(1)	There are no children under the age of 18 who are children of both Petitioner and Respondent.
		(2)	There are no children under the age of 18 who were adopted or born during this marriage.
		(3)	There are no children 18 years of age or older who still need support.
		(4)	Neither Petitioner nor Respondent is pregnant.
	В.	Break	down of marriage
		The ma	rriage is broken down and cannot be saved.
	C.	Couns	eling
		Counse	ling will not save the marriage.
	D.	Waiting	g period before decree Check one
		(1)	More than 90 days have passed since Respondent was served with an Original Notice.
		(2)	Fewer than 90 days have passed since Respondent was served with an Original Notice, but I want the court to take action right away without a separate hearing. There are no children affected by this action. Neither Petitioner nor Respondent is pregnant. This paper explains how I would like to settle all issues in my divorce.
	E.	Financ	ial affidavits Check one
		(1) 🔿	I filed a Financial Affidavit (124). I certify that I have fully disclosed all income and the identity and value of all assets and debts.
		(2) 🔘	I am asking that the court not require me to file a Financial Affidavit. Explain
	F.	Divisio	n of personal property Check one
		(1) 🔿	All of the personal property obtained during the marriage has been divided. I ask that Petitioner will keep the personal property in Petitioner's possession, and Respondent will keep the personal property in Respondent's possession. If you check (1) , $skip\ to\ G$.
		(2)	I ask that our personal property be divided as follows: Attach additional sheets if necessary.
		a.	Petitioner will get the following as Petitioner's separate personal property:
		b.	Respondent will get the following as Respondent's separate personal property:

 $Rule\ 17.100 — Form\ 127: \textit{Request for Relief in a Dissolution of Marriage with no \textit{Minor or Dependent Adult Children}, continued and the property of the$

G.	Division of	f real estate					
	For each parcel of real estate you own, provide the following information. Attach a separate sheet for each additional parcel.						
	(1) Owners	ship of real estate					
	Check o	one					
	a. 🔘) We do not own any real estate.	* *				
	b. 🔾		Street address	,			
		in the City of	, County of	_, and			
		State of	This land is described in the deed as follows:				
	(2) The re Check of a. b. c. d.						
	` ′ _	onal real estate	arate sheets for additional parcels of real estate.				
н	Division of		and and confor administrate parties of rear estate.				
11.	Check one	i denia					
		ere are no debts.					
	\sim		out and ask that they be divided as follows:				
		ach additional sheets if necessary.	The second secon				
	a Do	titionar will now the following deb	to:				

a. Petitioner will pay the following debts:

i. Business or person to whom a debt is owed	ii. Account number, if any Last 4 numbers only	iii. Total amount still owed
(a)		\$
(b)		\$

 $Rule\ 17.100 — Form\ 127: \textit{Request for Relief in a Dissolution of Marriage with no \textit{Minor or Dependent Adult Children}, continued and the property of the$

		(c)					\$
		(d)					\$
		(e)					\$
		Petitioner's del	if you are attaching a se ots. will pay the following	-	eet listing additi	onal information	about
			person to whom		ii. Account i	number, if numbers only	iii. Total amount still owed
		(a)					\$
		(b)					\$
		(c)					\$
		(d)					\$
		(e)					\$
l.	l as	Respondent's d c. For any debt v sh payment sk that ck one	if you are attaching a selebts. we do not know about	, the spo	use who made	the debt will p	
	(2)	Petitioner pay and debts by	Respondent \$		to	-	livision of property
	(3)	Respondent pand debts by	Day Petitioner \$			equalize the d	livision of property
J.	Che	$\check{\mathbf{z}}$	imony) oner nor Responden oort (alimony) be paid			(alimony) to th	e other.

3.

Rule 17.100—Form 127: Request for Relief in a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

K.	Name change Check one	
	I ask that my last name	
	•	
	(1) Not be changed.	No.
	(2) Be changed to: Print your former or birth name	Name can only be changed to name on birth certificate or name used immediately prior to the marriage.
L.	Court fees	<i>V1</i>
	Check one	
	I ask that	
	(1) Petitioner will pay all court fees.	
	(2) Respondent will pay all court fees.	
	(3) Petitioner and Respondent shall each pay one-half of	the remaining court fees.
	(4) Petitioner and Respondent shall each pay one-half of	the total court fees.
Μ.	Attorney's fees	
	Check one	
	(1) I have no attorney's fees.	
	(2) I will pay my own attorney's fees.	
	(3) I ask that my spouse pay me \$ for a	attorney's fees.
N.	Necessary documents	
	I ask that the court require each of us to sign and deliver to ea needed to carry out the terms of the Decree.	ch other any papers that may be
Ο.	Other request for relief Attach additional sheets if necessary	
St	atements of understanding and fact	
	eck all that apply	
A.	$\hfill \square$ I have made a full disclosure of my property and deb	ts to the court.
B.	☐ This request for relief addresses all issues in my divo	orce.
C.	☐ I want the court to approve this request for relief and	make it part of the final Decree.
		,
	Continued on next page	

 $Rule\ 17.100 — Form\ 127: \textit{Request for Relief in a Dissolution of Marriage with no \textit{Minor or Dependent Adult Children}, continued and the property of the$

4.	. Attorney Help							
	Check one							
	A. An attorney did not help me prepare or fill in this paper.							
	B. An attorney helped me prepare If you check B, you must fill in the fo							
	Name of attorney or organization, if	any	Attorney's P.I.N. #	+ – Ask the attorne	y			
	Business address of attorney or orga	nization	City	State	ZIP code			
	() ()						
	(orney's fax	number – optional	Attorney's email	address – optional			
5.	Section 5 to be completed only if filing in pap This document, if filed electronically will auto	per or if the matically b	other party is exem se served on register	red parties.				
	l, Print your name	, certif	y that on		, 20			
6.	Name of person to whom I delivered or mailed Party's or attorney's mailing address Oath and Signature	d it City		State	ZIP code			
•	ı	havo	road this Poque	et and Loortify	under nenalty			
	Print your name	, nave	read this Reque	st, and reening	under penalty			
	of perjury and pursuant to the laws of in this Request is true and correct. Signed on: Month Day		of lowa that the $\overline{Your signature^*}$	information I ha	ive provided			
	Signed on: Month Day I	ear	1 our signature "					
	Mailing address	Cit	y	State	ZIP code			
	() Email addre	2SS		tional email addres	ss, if applicable			
	* Whether filing electronically or in paper, you m scan the form after signing it and then file electr		e your signature on th	is form. If you are fil	ing electronically,			
		=						
1/10/	ovember 2013	Rule 17.100-	—⊢orm 12/		Page 6 of 6			

Rule 17.100—Form 128 Settlement Agreement for a Dissolution of Marriage with no Minor or Dependent Adult Children

Caution: This form may require you to provide protected or confidential information.

Use this form only if you and your spouse both agree to the terms of a settlement agreement.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (111) if you have not already done so.
- If filing in paper, you may use form 111 to provide any protected information in full.

Do not use this form if:

- You and your spouse have children under the age of 18, or
- You and your spouse have children 18 years of age or older who still need support.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the	lowa District Court for	County where your	case is filed	County
Upoi	n the Petition of	Equity case	e no	
Petitioner Full name: first, middle, last		Dissolu	Settlement Agreement for a Dissolution of Marriage with no Minor or Dependent Adult Children	
and c	concerning	Willion of	Dependent Ac	
Resp	pondent Full name: first, middle, last			
	ersonal Information Fill in all in			ulted by your spouse
and	rsonal Information Fill in all in	your address, phone numbe	er, and email blank.	ulted by your spouse
ano	ersonal Information Fill in all in al	your address, phone numbent residence: Birth year	r, and email blank.	ZIP code
A.	ersonal Information Fill in all in al	your address, phone number nt residence: Birth year City Phone number	er, and email blank. State Email a	ZIP code
A.	ersonal Information Fill in all in all in all you fear for your safety, you may leave Petitioner's birth year and prese Petitioner's present street address County	your address, phone number nt residence: Birth year City Phone number sent residence:	er, and email blank. State Email a	ZIP code

2. Agreements

 $Rule\ 17.100 — Form\ 128: \textit{Settlement Agreement for a Dissolution of Marriage with no \textit{Minor or Dependent Adult Children}, continued to the property of th$

We	e agree to the following:
A.	Children Check all that are true
	(1) \square There are no children under the age of 18 who are children of both Petitioner and Respondent.
	(2) There are no children under the age of 18 who were adopted or born during this marriage.
	(3) There are no children 18 years of age or older who still need support.
	(4) Neither Petitioner nor Respondent is pregnant.
B.	Breakdown of marriage
	The marriage is broken down and cannot be saved.
C.	Counseling
_	Counseling will not save the marriage.
D.	Waiting period before decree Check one
	(1) More than 90 days have passed since Respondent was served with an Original Notice.
	(2) Fewer than 90 days have passed since Respondent was served with an Original Notice, but we want the court to take action right away without a separate hearing. We have no children affected by this action. Neither Petitioner nor Respondent is pregnant. This paper explains how we would like to settle all issues in our divorce.
E.	Financial affidavits Check one
	(1) Petitioner or Respondent has filed a Financial Affidavit (124).
	If you check (1), check a and/or b.
	 a. Detitioner has filed a Financial Affidavit. Petitioner certifies that Petitioner has fully disclosed all income and the identity and value of all assets and debts.
	b. Respondent has filed a Financial Affidavit. Respondent certifies that Respondent
	has fully disclosed all income and the identity and value of all assets and debts.
	(2) We are asking that the court not require us to file Financial Affidavits because: Explain
F.	Division of personal property Check one
	(1) We have divided our personal property. Petitioner will keep the personal property in Petitioner's possession. Respondent will keep the personal property in Respondent's possession.
	If you check (1), skip to G.
	(2) Our personal property will be divided as follows: Attach additional sheets if necessary.
	a. Petitioner will get the following as Petitioner's separate personal property:

Rule 17.10	00—Form	128: <i>S</i>	ettlement Agreement for a Dissolution of M	arriage with no Minor or Dependent Adult Children, continued	
	b. Respondent will get the following as Respondent's separate personal property:				
		_			
G	Divisio	on of	real estate		
0.	For eac	ch pai	rcel of real estate you own, provide arate sheet for each additional parc		
	(1) Ov	wners	ship of real estate		
	Ch	eck o			
	a.	X	We do not own any real estate.		
	b.	\cup	We own real estate located at:	Street address	
			in the City of	, County of	, and
			State of	This land is described in the deed as follows:	
	` '	ne rea	al estate shall be:		
	a.		Sold and the profit or debt divided to Respondent.	led% to Petitioner and%	
	b.		Awarded to Petitioner, subject to	to all liens and mortgages.	
	C.		Awarded to Respondent, subje	ct to all liens and mortgages.	
	d.		Other Explain		
	(3) Ad	lditior			
		Che	eck this box if you are attaching sep	arate sheets for additional parcels of real estate.	
Н.	Divisio		debts		
	Check		oro aro no dobto		
	(1) There are no debts.(2) We have listed all the debts that we know about and ask that they be divided as follows:				
	(= <i>/</i>)		ach additional sheets if necessary.		
			Continue	ed on next page	

Rule 17.100—Form 128: Settlement Agreement for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

a. Petitioner will pay the following debts:

i. Business or person to whom a debt is owed	ii. Account number, if any Last 4 numbers only	iii. Total amount still owed
(a)		\$
(b)		\$
(c)		\$
(d)		\$
(e)		\$

Check this box if you are attaching a separate sheet listing additional information about Petitioner's debts.

b. Respondent will pay the following debts:

Month

i. Business or person to whom a debt is owed	ii. Account number, if any Last 4 numbers only	iii. Total amount still owed
(a)		\$
(b)		\$
(c)		\$
(d)		\$
(e)		\$

- Check this box if you are attaching a separate sheet listing additional information about Respondent's debts.
- c. For any debt we do not know about, the spouse who made the debt will pay that debt.

I. Cash payment

W	6	а	9	k	th	at
vv	C	\boldsymbol{a}	3	Λ.	ш	101

Check one

(1) Neither Petitioner nor Responde	ent pay any money to the other.		
(2) Petitioner pay Respondent \$ and debts by			
Month	, 20 Day Year		
(3) Respondent pay Petitioner \$ and debts by			
	20		

Continued on next page

 \overline{Day}

 $Rule\ 17.100 - Form\ 128: \textit{Settlement Agreement for a Dissolution of Marriage with no \textit{Minor or Dependent Adult Children}, continued to the property of th$

J.	Spousal support (alimony)								
	Check one We ask that:								
	(2) Petitioner pay spousal support (alimony)	to Respondent as follows.							
	(3) Respondent pay spousal support (alimon	y) to Petitioner as follows:							
k	Name change								
IX.	Check one								
	We ask that								
	(1) Petitioner's name								
	a. Not be changed.								
	b. Be changed to:	Name can only be changed to							
		name on birth certificate or name used immediately prior to the marriage.							
	Print Petitioner's former or birth name	_ immediately prior to the marriage.							
	(2) Respondent's name								
	a. Not be changed.								
	b. O Be changed to:	Name can only be changed to name on birth certificate or name used							
	Print Respondent's former or birth name	immediately prior to the marriage.							
L.	Court fees								
	Check one								
	We ask that								
	(1) Petitioner will pay all court fees.								
	(2) Respondent will pay all court fees.								
	(3) Petitioner and Respondent shall each pay one-half of the remaining court fees.								
	(4) Petitioner and Respondent shall each pay one-half of the total court fees.								
	We ask that (1) Petitioner will pay all court fees. (2) Respondent will pay all court fees. (3) Petitioner and Respondent shall each pay								

Rule 17.100—Form 128: Settlement Agreement for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

M.	Attorney's fees	
	(1) Petitioner's attorney's fees	
	Check one	
	 a. Petitioner has no attorney's fees. 	
	 b. O Petitioner will pay Petitioner's attorney's fees. 	
	c. Respondent will pay \$	for Petitioner's attorney's fees.
	(2) Respondent's attorney's fees	
	Check one	
	 a. Respondent has no attorney's fees. 	
	b. Respondent will pay Respondent's attorney's fe	es.
	c. O Petitioner will pay \$	_ for Respondent's attorney's fees.
N.	Necessary documents	
	We will sign and promptly deliver to each other any papers the Settlement Agreement.	nat may be needed to carry out this
Ο.	Other agreements Attach additional sheets if necessary.	

4.

Rule 17.100—Form 128: Settlement Agreement for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

3.		torney Help eck one								
	A.	Petitioner	Petitioner							
		An attorney did not help me prepare or fill in this paper.								
		(2) An attorney helped r								
		If you check (2), you n								
		Name of attorney or organ	ization, if any	Attorney's P.I.N. $\#$ – Ask the attorney						
		Business address of attorne	ey or organization	City	State	ZIP code				
		()		: number – optional	444	.1 . 11				
	R	Attorney's phone number Respondent	Attorney's jax	: number – optional	Attorney's ema	il address – optional				
	٥.		ooln mo proparo or	fill in this paper						
		 (1) An attorney did not help me prepare or fill in this paper. (2) An attorney helped me prepare or fill in this paper. 								
		(2) An attorney helped r If you check (2), you n								
		Name of attorney or organ	ization, if any	Attorney's P.I.N.	#-Ask the attorn	аеу				
		Business address of attorn	ey or organization	City	State	ZIP code				
		()	()_							
		Attorney's phone number	Attorney's fax	number – optional	Attorney's ema	il address – optional				
4.		aths and Signatures								
	pro	is Settlement Agreement addres operty and debts to each other.								
		al Decree.								
	Α.	Petitioner's Oath and Signat	ure							
		l,	, certify	under penalty of pe	rjury and pursuan	t to the				
		laws of the State of Iowa that I I	nave read this Settler	ment Agreement and	l it accurately state	es how I would				
		like the court to address the iss		_		•				
		Agreement. I am voluntarily sig presented to a judge for approv		_	is Settlement Agre	eement be				
			20							
		Month Day	Year Year	Petitioner's signa	ture*					
		Mailing address	City		State	ZIP code				
		()								
		Phone number	Email address	Ac	lditional email ad	dress – if available				
		* Whether filing electronically or electronically, scan the form aft			on this form. If you	are filing				
		erectronically, scan the form aft		•						
			Commuea	l on next page						

Rule 17.100—Form 128: Settlement Agreement for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued B. Respondent's Oath and Signature Print your name , certify under penalty of perjury and pursuant to the laws of the State of Iowa that I have read this Settlement Agreement and it accurately states how I would like the court to address the issues in my divorce. I know I have the right to talk to an attorney about this Agreement. I am voluntarily signing this Agreement. I am asking that this Settlement Agreement be presented to a judge for approval and filing with the court. Month Respondent's signature* Mailing address City ZIP code State Email address Additional email address - if available

* Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.

Rules 17.101 to 17.199 Reserved.

Rule 17.200 Family law forms for dissolution of marriage with dependent children. The following forms are for use in dissolution of marriage (divorce) actions with children under the age of 18 who are children of both spouses to the marriage, or children under the age of 18 who were adopted or born during the marriage, or children 18 years of age or older who are children of both spouses to the marriage and are dependent or still need support. These forms must also be used if a spouse of the marriage is pregnant.

[Court Order December 19, 2013]

Rule 17.200-Form 201: Petition for Dissolution of Marriage with Children

Read the <u>Guide to Representing Yourself in an Iowa Divorce Case with Children</u> on the Iowa Judicial Branch website before using this form.

Petitioner: Use this form only if your spouse lives in Iowa or you have lived in Iowa for the last year before you file the Petition, and one or more of the following are true:

- There are children under age 18 who are children of both Petitioner and Respondent.
- There are children under age 18 who were born or adopted during this marriage.
- There are children over age 18 who still need support.
- A spouse is pregnant.

Do not use this form if all of these are true (instead, use form 201):

- · You and your spouse do not have children under age 18.
- . You and your spouse do not have children age 18 or over who still need support.
- A spouse is not pregnant.
- If filing electronically, you must provide any protected information in full on form 211.
- If filing in paper, you may use form 211 to provide any protected information in full.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court fo		4.:. D.4:4:.	County
In Re the Marriage of:	County where you are filir	ng this Petition	
Your current legal name	Your spouse 's cu	ırrent legal name	
Upon the Petition of			
	For clerk's use only		
Petitioner Full name: first, middle, last The spouse who files the Petition and concerning	Petition f	or Dissolution with Childre	
Respondent Full name: first, middle, last The other spouse			
1. Personal Information Fill in all in and you fear for your safety, you may leave	your street address, phone m		
A. Petitioner's (your) birth year and	Birth	year	
Petitioner's present street address	City	State	ZIP code
County	Phone number	Email a	ddress
Соп	ntinued on next page		
If you need assistance to participate in court due to a disability			Persons who are

contact information available at: http://www.iowacourts.gov/Administration/Directories/ADA_Access/ .

Rule 17.200—Form 201: Petition for Dissolution of Marriage with Children, continued

					Birth ye	ur
	Respondent's present stre	et address	City		State	ZIP code
	County		Phone number	r	Email ac	ddress
C.	Other person, if any, Fill in as much information			ody rights of the	parties' o	children:
	Full name: first, middle, i	last	-			
	Present street address		City		State	ZIP code
	County		_ () _ Phone numbe	<u>r</u>	Email ac	ddress
A.	Date and location of	,				
	Month I	Day Yea	r City		Si	tate
В.	Children Check all that are true					
			40			
		en i inder ade	TRIWOO are con-	dren of both Petition	ner and R	esmondent
	• •	-		dren of both Petition adopted or born d		·
	(2) There are child	lren under ag	e 18 who were	dren of both Petition adopted or born do the marriage, but for the marriage, but for the marriage.	uring this	marriage.
	(2) There are child This includes an a parent.	lren under ag y child born to	e 18 who were a spouse during	adopted or born d	uring this	marriage.
	(2) There are child This includes an a parent.	lren under ag y child born to Iren 18 years	e 18 who were a spouse during or older who st	adopted or born determined the marriage, but for	uring this	marriage.
C.	(2) There are child This includes an a parent. (3) There are child	lren under ag y child born to Iren 18 years espondent is	e 18 who were a spouse during or older who st	adopted or born determined the marriage, but for	uring this	marriage.
C.	 (2) There are child This includes an a parent. (3) There are child (4) Petitioner or Re 	lren under ag y child born to Iren 18 years espondent is	e 18 who were a spouse during or older who st pregnant.	adopted or born determined the marriage, but for	uring this or whom th	marriage. ne other spouse
C.	(2) There are child This includes an a parent. (3) There are child (4) Petitioner or Relidentification of childs First, middle, & last	Iren under ag y child born to Iren 18 years espondent is	e 18 who were a spouse during or older who st pregnant.	adopted or born do the marriage, but for ill need support. First, middle,	uring this or whom th	marriage. ne other spouse
C.	(2) There are child This includes an a parent. (3) There are child (4) Petitioner or Relidentification of childs First, middle, & last initials of each child	Iren under ag y child born to Iren 18 years espondent is	e 18 who were a spouse during or older who st pregnant.	adopted or born deathe marriage, but for ill need support. First, middle, initials of each	uring this or whom th	marriage. ne other spouse
C.	(2) There are child This includes an a parent. (3) There are child (4) Petitioner or Relidentification of childs First, middle, & last initials of each child (1)	Iren under ag y child born to Iren 18 years espondent is	e 18 who were a spouse during or older who st pregnant.	adopted or born do the marriage, but for ill need support. First, middle, initials of each	uring this or whom th	marriage. ne other spouse
C.	(2) There are child This includes an a parent. (3) There are child (4) Petitioner or Relidentification of childs First, middle, & last initials of each child (1) (2)	Iren under ag y child born to Iren 18 years espondent is ren Birth ye	e 18 who were of a spouse during or older who st pregnant.	adopted or born dithe marriage, but for ill need support. First, middle, initials of each (4) (5) (6)	uring this or whom the A last a child	marriage. ne other spouse
	(2) There are child This includes an a parent. (3) There are child (4) Petitioner or Religional Petitioner of Childs First, middle, & last initials of each child (1) (2) (3)	lren under ag y child born to lren 18 years espondent is ren Birth ye	e 18 who were of a spouse during or older who st pregnant.	adopted or born dithe marriage, but for ill need support. First, middle, initials of each (4) (5) (6)	uring this or whom the A last a child	marriage. ne other spouse
	(2) There are child This includes an a parent. (3) There are child (4) Petitioner or Reldentification of childs First, middle, & last initials of each child (1) (2) (3) Check this box if your	Iren under ag y child born to Iren 18 years espondent is ren Birth ye have attached ngements ren have lived	e 18 who were a spouse during or older who st pregnant.	adopted or born dithe marriage, but for the	uring this or whom the Relation this and the second this this this this this this this this	Birth year
	(2) There are child This includes an a parent. (3) There are child (4) Petitioner or Relational Petitioner or Relational Identification of childs First, middle, & last initials of each child (1) (2) (3) Check this box if your Children's living arrand Places where the childs	Iren under ag y child born to Iren 18 years espondent is ren Birth ye have attached ngements ren have lived	e 18 who were a spouse during or older who st pregnant.	adopted or born dithe marriage, but for the	uring this or whom the Relation this and the second this this this this this this this this	Birth year

Rule 17.200-Form 201: Petition for Dissolution of Marriage with Children, continued Lived with Adult name State City (2) Children: Initials Initials Initials Initials Initials Lived with Adult name mm уууу State (3) Children: Initials Initials Initials Initials Initials Lived with Adult name State City (4) Children: Initials Initials Initials Initials Initials Lived with Adult name mmCity State (5) Children: <u>Initials</u> Initials Initials Initials Initials Lived with from Adult name dd mm mmyyyy State ☐ Check this box if you have attached a separate sheet listing additional children. If the children have been in Iowa for less than six months, you may be able to get a divorce, but you might not be able to get custody. The rules are complicated and you may need to talk to an attorney. E. Petitioner's residence You cannot get a divorce in Iowa if your spouse does not live in Iowa and you have lived in Iowa for less than one year, or if you came to live in Iowa just to get a divorce. If you do not live in Iowa, you can only get a divorce in Iowa if your spouse lives in Iowa. If you have questions about this, talk to an attorney. (1) The only reason that Petitioner (you are Petitioner) is living in Iowa is just to get a divorce. True

divorce, check "False."

If you do not live in Iowa, or if you live in Iowa for reasons other than just to get a

Rule	2 17.2	00—Form	201:	Petition for I	Dissolution o	of Marriage	with Childr	ren, co	ntinued				
									_ years ar	nd	months	3	
		in ₋					county.						
			-						since your the time sin		st moved to l	Iowa.	
	F.	Parties	s' re	esidence									
		divorce	in I	owa.		owa, you	ı must hav	e liv	ed in Iowa	for the la	ast year befo	ore you may	obtain a
				that is tru									
									one year.				
		(2)	Re	esponden	t (your sp	oouse) is	s a reside	ent of	lowa.				
	G.	Condit	tion	of the m	arriage								
		Check o	all th	at are tru	?								
		(1)	Th	e marriag	je is brok	en and	cannot b	e sav	/ed.				
		(2)			•				olving this <i>uld also ta</i>	-	•		
		(3)	Th	is Petition	n is being	filed in	good fait	th for	the purpo	ose of e	nding the m	narriage.	
		(4)	Co	ounseling	will not sa	ave the n	narriage.	If con	unseling m	ay save th	ne marriage,	do not check	(4).
	Н.	•		ent's stat									
		(1)	Re	sponden	t (your sp	oouse) is	in the m	nilitar	y service.				
									ay prevent n attorney.		se from goin	g forward if	your
		(2)	Re	sponden	t is in pris	son or ja	ıil at					in	
							Name	e of fa	acility			St	ate
	I.	Check of		or no c	ontact o	rder							
		(1)		ere is nei esponden	•		e order" n	or a	"no conta	ct order	" between f	Petitioner (y	ou) and
		(2)		ere is a " vou check						betwee	n Petitioner	and Respo	ndent.
			a.	County a	and state	where the	e order ca	me fr	om:				
									Count	y		St	ate
_			b.		se numbe								
3.		her Ca eck A or		s Abou	t the C	hildren	1						
	A.	\bigcirc Th	ere	are no d	ther cas	ses abo	ut the cl	hildre	en. If you	check A	, skip to 4.		
	B.	If there	is aı		m out of	state abou	ut the chile	dren,				to issue an o	rder
		about c	usto	dy or visit	ation. Th	e rules ar	e complic	ated	and you ma	ay need 1	to talk to an	attorney.	

Rule 17.200-Form 201: Petition for Dissolution of Marriage with Children, continued If you check B, fill in the applicable information below. (1) Juvenile court Check a or b.) There is no juvenile court case. There is a juvenile court case. If you check b, fill in the following information: County and state of the juvenile court case: County State Juvenile court case number: Check one Concurrent jurisdiction has been granted. Concurrent jurisdiction has not been granted. If the juvenile court has not given concurrent jurisdiction (permission), then child custody cannot be decided in this case. You should talk to an attorney. (2) Custody order You might not be able to get custody in Iowa if there is a custody order entered in another state. Check a or b. There is no custody order. There is a custody order. If you check b, fill in the following information: County and state where the custody order came from: County State ii. Court case number: (3) Child support order Check a or b. There is no child support order. There is a child support order. If you check b, fill in the following information: County and state where the child support order came from: County State Court case number: **4.** Other Information All of the basic information you need to tell the court is listed on this form. Provide other information only if you need to explain something. 5. Petitioner's Request

A. Petitioner asks the court to:

Check all that apply. The court will only consider items that are checked.

(1) End the marriage of Petitioner (you) and Respondent (your spouse)

Rule 17.200—Form 2	201: Petition for Dissolution of Marriage with Children,	continued
(2)	Decide custody and visitation.	
(3)	Order child support and medical suppor	t.
(4)	Order payment of school or college tuitie	on.
(5)	Fairly divide the property and the debts	of the parties.
(6)	Order that Respondent pay the court fee	es.
(7)	Order that Respondent pay for Petitioner's If you check (7), you must file form 222.	s attorney's fees before the divorce is final.
(8)	Order that Respondent pay spousal sup If you check (8), you must file form 222.	pport (alimony) to Petitioner.
(9)	Change Petitioner's last name to:	Name can only be changed to name on birth certificate or name used immediately prior to the marriage.
	Print your former or birth name	
(10)	Order counseling to save the marriage.	
(11)	Other request:	

Continued on next page

6. Attorney Help

Rule 17.200—Form 201: Petition for Dissolution of Marriage with Children, continued

	Check o					e		
	А. () В. ()				me prepare o prepare or fill i	or fill in this pap in this paper.	er.	
	J. ()				n the following i			
		Name o	of attorney	or organiza	ution, if any	Attorney's P.I	I.N. # - Ask the attention of the second contract of the second co	orney
		Busines	ss address	of attorney	or organization	- City	State	ZIP code
		()		_ ()			
		Attorne	y's phone	number	Attorney's f	ax number – option	al Attorney's er	nail address – optiona
7.	Servi	ce Inst	truction	ns				
			filing in	paper,				
	Check o							
	_							listed above; or
	В. ()	Petitio	ner will a	accept serv	rice of docume	ents in this case	at the mailing a	ddress below.
8.	Oath	and Si	ignatur	e				
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	Print	your nar	пе		, 110	re read tills i e	tition, and room	ny dilaci perialty
		-	-			te of lowa that	the information	I have provided
	in this	Petitior	is true	and correc	ct.			
	g:1	1.6	41-	- D	, 20 <u></u>	Your signatur	*	
	Signea (on: Mo	ontn	Day	iear	i our signatur	e*	
	Mailing	address	1			City	Stat	ze ZIP code
	()						
	Phone n	umber		Ema	il address	1	Additional email ac	ldress, if applicable
		-			r, you must handw ile electronically.	rite your signature o	on this form. If you a	re filing electronically,
		-		5	ne ereen omeany.			
				gy-	ue electronically.			

Important Notice to Petitioner
See next page for instructions for filing a Petition.

Rule 17.200—Form 201: Petition for Dissolution of Marriage with Children

Do not file these instructions

Instructions for Filing a Petition for Dissolution of Marriage with Children

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, check the map available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, you must file electronically unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

Filing your Petition electronically

- If you are filing your divorce case in a county that uses electronic filing, you must register to
 electronically file. For help with registration, see the eFiler's User Guide <u>How to Register Pro Se (Self Represented) for eFiling</u> on the Iowa Judicial Branch website.
- After you have registered, <u>log in to the electronic filing system</u> to electronically file your dissolution case.
- For help electronically filing your divorce, see <u>How to eFile a New Case</u>.
- With your Petition, you must also file an Original Notice (204) and a Protected Information Disclosure Form (211).
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the efiling
 of your Petition and other documents.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My
 Filings, correct the error, and resubmit your filing. For help, see <u>How to Resubmit a Returned Filing</u>.
- Log in to your eFile account and download and print your Petition and Original Notice so that you can serve it on (deliver it to) your spouse.
- For help finding and downloading your Petition and Original Notice, please see <u>My Filings Reference</u> <u>Guide</u>.

Filing your Petition in paper

- If the county where you will be filing your Petition does not yet accept electronic filing, you may
 proceed in paper. If the county does accept electronic filing, you must proceed electronically, unless
 you have received permission from the court to file in paper.
- With your Petition (201), you must also file a Petition Cover Sheet (202), an Original Notice (204a), and a Confidential Information Form (203).
- Forms 201 and 204a: Make two photocopies if you can deliver copies of these forms to your spouse inperson or by mail. Make three photocopies if you are going to ask the county sheriff or a civil process server to deliver these forms to your spouse.

Note about making photocopies: You should make your photocopies before you go to the courthouse to file your papers. It is expensive to make photocopies at the clerk of court office. It is cheaper to make the copies at a business that makes photocopies or at a public library.

- Forms 202 and 203: You do not have to make photocopies of these forms.
- Take the original forms you filled in and the photocopies to the clerk of court office in your county.
 Tell the clerk at the counter you are filing a Petition for a divorce.

Instructions for Rule 17.200—Form 201: Petition for Dissolution of Marriage with Children, continued

- · Give the clerk at the counter these forms:
 - 201 Petition for Dissolution of Marriage with Children
 - 202 Coversheet for a Petition for Dissolution of Marriage with Children
 - 203 Confidential Information Form (Do not make copies of this form.)
 - 204a Original Notice
- Pay the filing fee. If you cannot afford to pay the filing fee, prepare and file form 209.
- The clerk at the counter can tell you the amount of the filing fee. The Iowa legislature sets these fees and periodically raises them, so check with the clerk's office to confirm the current filing fee.
- The clerk of court will sign the Original Notice (204a). You will have to serve this form on (deliver it to) your spouse.
- The clerk at the counter will time-stamp each of the copies (original and photocopies).

Do not file these instructions

Rule 17.200—Form 202: Petition Cover Sheet for a Dissolution of Marriage with Children

For court use only Case num	ber	County where case is fil	'ed	_
Petitioner				
Petitioner's first name	Middle name	Last name		_
Street address		City	State	ZIP code
() Phone number	 Email addr	ress		
Case name				
Petitioner's first name	Middle name	Last name		-
VS.				
Respondent's first name	Middle name	Last name		_

Note to Petitioner

- Petitioner must complete this cover sheet if filing in paper and give it to the clerk of court when filing a Petition for Dissolution of Marriage with Children (201).
- Do not serve this cover sheet on Respondent.
- This cover sheet is for statistical purposes only. It has no legal effect in the case.
- Electronic filers: Do not use this form. The information on this form is automatically generated when you submit your documents electronically.

Rule 17.200—Form 203: Confidential Information Form

This form is to be used by paper filers only.

Each party must complete one of these forms if filing in paper.

lowa Code section 602.6111 requires the parties to a case to provide the clerk of court with certain personal identification information. Each party's completed form will be kept confidential by the clerk of court.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

	In the Iowa District Court for _	County where your case is filed			
Jp	on the Petition of	Equity case r	10		
	titioner Full name: first, middle, last spouse who files the Petition	Confide	ential Information Form		
no	d concerning				
le ie	spondent Full name: first, middle, last other spouse				
	Petitioner's Information	, , , ,			
	Full name: first, middle, last	Birth date	Social Security number		
	Respondent's Information	, , ,			
	Full name: first, middle, last	Birth date	Social Security number		
	Children's Information				
	Child 1:				
	Full name: first, middle, last	Birth date	 Social Security number		
	Child 2:	, , , ,			
	Full name: first, middle, last	Birth date	Social Security number		
	Child 3:				
	Full name: first, middle, last	Birth date	Social Security number		
	Child 4:				
		/ /	Social Security number		

number

Rule 17.200—Form 204: Original Notice for Personal Service

Petitioner must serve the Petition on Respondent within 90 days after filing the Petition.

Failure to meet this deadline may result in the court dismissing the divorce case.

Read the <u>Guide to Representing Yourself in an Iowa Divorce Case with Children</u> on the Iowa Judicial Branch website for additional important instructions. Iowa divorce forms are available free of charge on the <u>Iowa Judical Branch website</u>.

- If filing electronically, Petitioner must complete this form.
- If filing in paper, Petitioner must use form 204a.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the lowa District Court for _		County where Peti	tion is filed	County
Upon the Petition of		Original No	tice for Pe	rsonal Service
Petitioner Full name: first, middle, last				
and concerning				
Respondent Full name: first, middle, last				
 To Respondent Named Above Petitioner (your spouse) has file A copy of the Petition for Dissolu Petitioner asks for a divorce. Petitioner's contact information	ution of Marri	age with Children		
retitioner's contact informatic	on during the	e divorce case.	Petitioner's n	ате
Mailing address	City		State	ZIP code
Phone number	Email addres	s		
Important inst	ructions for	· Respondent on	next page	

Rule 17.200-Form 204: Original Notice for Personal Service, continued

Instructions to Respondent

- A. You must file an Answer or a Motion with the clerk of court in the above county within 20 days after you receive this Original Notice. If you do not file an Answer or Motion within 20 days after receiving this Original Notice, the court may enter a judgment against you giving Petitioner what he or she asked for in the Petition.
- B. For help in your divorce case, and for forms that you must use if you choose to represent yourself without an attorney, visit the Iowa Judicial Branch website at http://www.iowacourts.gov/ and click on "Court Rules & Forms" or on "For the Public."
- C. If you received Petition form 201, you may use Answer form 215.
- D. This case has been filed in a county that uses electronic filing. You must register to eFile through the Iowa Judicial Branch website at https://www.iowacourts.state.ia.us/Efile and obtain a log in and password for filing and viewing documents in your case and for receiving service and notices from the court.
 - For general rules and information on electronic filing, refer to the Iowa Court Rules Chapter 16
 Pertaining to the Use of the Electronic Document Management System, available on the Iowa Judicial
 Branch website.
 - For court rules on the Protection of Personal Privacy in court filings, refer to Division VI of the Iowa Court Rules Chapter 16.
 - If you are unable to proceed electronically, you must receive permission from the court to file in paper.
 Contact the clerk of court in the county where the petition was filed for more information on being excused from electronic filing.
- E. If you electronically file your Answer or Motion, it will be served automatically on Petitioner or on Petitioner's attorney(s). A Notice of Electronic Filing (NEF) will tell you if the court has excused Petitioner from electronic filing. If the court has excused Petitioner from electronic filing, you must mail a copy of your Answer or Motion to Petitioner.

Important Notice to Respondent
You should talk to an attorney at once to protect your interests.

lowa

ZIP code

Rule 17.200—Form 204a: Original Notice for Personal Service

Petitioner: Use this form only if filing in paper. Read the Guide to Representing Yourself in an Iowa Divorce Case with Children for additional important instructions. Iowa divorce forms are available free of charge on the Iowa Judicial Branch website. If filing electronically, Petitioner must use form 204. If filing in paper, Petitioner must use this form. If you do not understand how to use this form, or if you should use this form, talk to an attorney. County In the Iowa District Court for County where Petition is filed **Upon the Petition of** Equity case no. **Original Notice for Personal Service** Petitioner Full name: first, middle, last and concerning Respondent Full name: first, middle, last 1. To Respondent Named Above Petitioner (your spouse) has filed a divorce lawsuit naming you as Respondent. A copy of the Petition for Dissolution of Marriage with Children is attached to this Notice. Petitioner asks for a divorce. Petitioner's contact information during the divorce case: Petitioner's name ZIP code Mailing address City State Email address 2. Instructions to Respondent Named Above You must file an Answer or a Motion with the clerk of court in the above county within 20 days after you receive this Original Notice. If you do not file an Answer or Motion within 20 days after receiving this Original Notice, the court may enter a judgment against you giving Petitioner what he or she asked for in the Petition. If you received Petition form 201, you may use Answer form 215. After you file your Answer or Motion, you must serve a copy of it on Petitioner. (SEAL) Clerk of Court County Courthouse

December 2013 Rule 17.200—Form 204a Page 1 of 1

City

contact information available at: http://www.iowacourts.gov/Administration/Directories/ADA_Access/.

Important Notice to RespondentYou should talk to an attorney at once to

protect your interests.

Rule 17.200—Form 205: Acceptance of Service

Petitioner must complete this section:

In the Iowa District Court for		Со	unty
	County where Petition is filed	t	
Upon the Petition of	Equity case no		
Petitioner Full name: first, middle, last	Acceptance	e of Servi	ce
and concerning			
Respondent Full name: first, middle, last	_		
Petitioner must file this form with the clerk of court so	oon after Respondent signs it.		
Respondent must complete this section:			
	Oath, and Signature		
Respondent's Acceptance of Service, If Respondent completes this Acceptance of Service, R	espondent must return this form to	o Petitioner s	soon after
Respondent's Acceptance of Service, If Respondent completes this Acceptance of Service, R signing it. Petitioner will file it with the clerk of court	espondent must return this form to t.		
Respondent's Acceptance of Service, If Respondent completes this Acceptance of Service, R signing it. Petitioner will file it with the clerk of court	espondent must return this form to		
Respondent's Acceptance of Service, If Respondent completes this Acceptance of Service, R signing it. Petitioner will file it with the clerk of court I, Print your name of the Original Notice and the Petition for this	espondent must return this form to t. , am Respondent in this ca s case. I have read this Acc	ase. I rece	eived a copy
Respondent's Acceptance of Service, If Respondent completes this Acceptance of Service, R signing it. Petitioner will file it with the clerk of court I, Print your name of the Original Notice and the Petition for this I certify under penalty of perjury and pursuar	tespondent must return this form to t. , am Respondent in this ca s case. I have read this Acc nt to the laws of the State of	ase. I rece eptance of lowa that t	eived a copy
Respondent's Acceptance of Service, If Respondent completes this Acceptance of Service, R signing it. Petitioner will file it with the clerk of court I, Print your name of the Original Notice and the Petition for this I certify under penalty of perjury and pursuar information I have provided in this Acceptance	tespondent must return this form to t. , am Respondent in this ca s case. I have read this Acc nt to the laws of the State of	ase. I rece eptance of lowa that t	eived a copy
Respondent's Acceptance of Service, If Respondent completes this Acceptance of Service, R signing it. Petitioner will file it with the clerk of court I, Print your name of the Original Notice and the Petition for this I certify under penalty of perjury and pursuar information I have provided in this Acceptance	espondent must return this form to t, am Respondent in this ca s case. I have read this Acc at to the laws of the State of the of Service is true and cor	ase. I rece eptance of lowa that t	eived a copy
Respondent's Acceptance of Service, If Respondent completes this Acceptance of Service, Resigning it. Petitioner will file it with the clerk of court Print your name of the Original Notice and the Petition for this I certify under penalty of perjury and pursuar information I have provided in this Acceptance, 20, 20	tespondent must return this form to t. , am Respondent in this ca s case. I have read this Acc nt to the laws of the State of	ase. I rece eptance of lowa that t	eived a copy
Respondent's Acceptance of Service, If Respondent completes this Acceptance of Service, R signing it. Petitioner will file it with the clerk of court I, Print your name of the Original Notice and the Petition for this I certify under penalty of perjury and pursuar information I have provided in this Acceptance Signed: Month Day Year	espondent must return this form to t, am Respondent in this ca s case. I have read this Acc at to the laws of the State of the of Service is true and cor	ase. I rece eptance of lowa that t	eived a copy
Print your name of the Original Notice and the Petition for this I certify under penalty of perjury and pursuar information I have provided in this Acceptance	espondent must return this form to to the case. I have read this Account to the laws of the State of the of Service is true and content to the laws of the State of the State of the Service is true and content in this case.	ase. I rece eptance of lowa that t rect.	eived a copy Service. the

Important Notice to Respondent

By signing this form, you are not agreeing to what Petitioner wants. You are only agreeing that you received a copy of the Original Notice and Petition.

Rule 17.200—Form 206: Directions for Service of Original Notice

Petitioner: Complete this form if the sheriff or a process server will deliver the Petition and Original Notice to Respondent.

- Do not use this form if Respondent has already received the Petition and Original Notice.
- Do not file this form with the clerk of court in paper or electronically.
- Give this form to the sheriff or other process server with your Petition (201) and Original Notice (204 if electronically filing or 204a if filing in paper).

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

ounty where Petition is filed	Equity case number		
Name and Location of SI Check one and fill in the blanks	heriff or Other Process Serv	er	
A. Sheriff In county where	Respondent will be served County		
Street address	City	State	ZIP code
B. Other process server			
Name of other person serv	ring the Notice		
Street address	City	State	ZIP code
Person to be Served			
Your spouse's name	Phone number		
Address where your spouse can be	served City	State State	ZIP code
Person Requesting Serv	ice		
Your name	() Phone number		
Your present mailing address	City	State	ZIP code
	Service Provide information that wi	ill help the sheriff o	r process server
delivering papers to Respondent.			

5. Costs of Service

Rule 17.200—Form 206: Directions for Service of Original Notice, continued

	Check one	
	A. O Petitioner will pay the costs of the Sheriff If you cannot afford the costs, file form 209.	or other process server.
	B. Costs for Sheriff deferred by court order:	
	,	Clerk of court: Sign only if costs deferred
		by court order
6.	Notification	
	After completion of service, the sheriff or other pro- requesting service.	cess server will notify the person
	, 20	
	Signed: Month Day Year	Your signature

Rule 17.200—Form 207: Motion and Affidavit to Serve by Publication

Petitioner: Use this form only if you do not know where your spouse lives or works.

- You must contact a newspaper that is generally distributed or circulated throughout the county where you filed the Petition
- Ask if the newspaper will publish your Original Notice by Publication (208) in your divorce case.
- Tell the newspaper you need to publish the Notice once each week for three weeks in a row.
- If the newspaper can publish your Notice three weeks in a row, ask how much it will cost.
- Tell the newspaper you will call back to arrange for publishing your Notice after a judge gives you permission to publish your Notice in the newspaper.
- The fees for publication are set by statute in Iowa Code section 618.11.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

	In the Iowa District Court for	County where you file	d the Petition	County
Upor	n the Petition of		no.	
Petiti	ioner Full name: first, middle, last		tion and Affiderve by Public	
and c	oncerning			
Resp	ondent Full name: first, middle, last			
A.	Respondent's residence Check each that applies (1) Respondent lives outside of (2) Respondent's residence and		unknown.	
В.	Respondent's last known resider	nce:		
В.	Respondent's last known resider Street address	nce: - City	State	ZIP code
В.		_	State Email a	
	Street address County Most recent date Respondent is	City () Phone number	Email a	ddress

Rule 17.	200—Form 207: Motion and Affidavit to Serve by Publication, continued
D.	Petitioner has taken these steps to find Respondent:
_	
E.	Petitioner will publish notice in this newspaper: Name of newspaper
F.	Petitioner asks the court to allow Petitioner to serve Respondent by publication because Respondent cannot be personally served.

Continued on next page

Rule 17.200—Form 207: Motion and Affidavit to Serve by Publication, continued

2.		iey Help								
	Check o		ما مما الممالة:		au fill in this na					
	A. O				or fill in this pa	aper.				
	В. ()	An attorney h		•						
		Name of attorne	v or organizati	on if any	Attorney's F	PIN # _ 4ek t	he attornes	,		
		ivame of anome	y or organizati	or organization, if any		Attorney's P.I.N. $\# - Ask t$				
		Business address	s of attorney or	organization	ī City		State	ZIP code		
		()_	o numbar	() fax number – optic	and Attorne	ov's amail	address entional		
3.	Oath a	and Signatur		11ttorney s	jak rismoer opik	7111077K	y s cinair (vicion ess opnomia		
٠.		_		ha	ave read this M	Notion and At	fidavit a	nd I certify		
	Print	I,, have read this Motion and Affidavit, and I certify Print your name								
					laws of the St true and corre		hat the ir	nformation I		
	nave p	rovided in this								
	Signed o	on: Month	Day	Year Year	Your signatu	ure*				
	Mailing	address			City		State	ZIP code		
	(umber	Fmail	address		Additional en	nail addres	s, if applicable		
		er fuing electronica ne form after signin			write your signatur	e on inis form. Ij	you are fili	ng eiectronically,		

Rule 17.200—Form 208: Original Notice by Publication

Petitioner: Complete this form only if a judge has signed an order giving permission to publish this Notice in a newspaper.

After you take this Notice to the newspaper, promptly mail a copy of this Notice and the Petition to Respondent's last known mailing address.

Note to Petitioner: Fill in third date of publication in section 2 below.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

Newspaper: Publish only the information below this line.

	In the lowa District Court for	County where Petitic	on is filed	County
Upon the Petition of Petitioner Full name: first, middle, last and concerning Respondent Full name: first, middle, last		Equity case n		
		Original Notic		ublication
1.	Petitioner's contact information during the discrete relationer's name: First, middle, last	awsuit naming you as Resp	oondent.	
	Petitioner's present street address	City	State	ZIP code
	County	hone number	Email a	ddress
	Respondent's Deadline for Filing a Reyou must file an Answer or a Motion with the Month Day Year.	esponse		
lf you	Instructions to Respondent Named All You must file an Answer or a Motion with the claprovided above. If you do not respond, the cours she asked for in the Petition. Importa You should talk to an attorney at once to protect your of the shoot of the protect your self-represented litigant information and family law for need assistance to participate in court due to a disability, contains or speech impaired may call Relay lowa TTY (1-800-735-294).	erk of court in the above of the may enter a judgment agont Notice to Responder interests. In this matter, go to the lowa Jorms. In the disability coordinator at: (ainst you giving nt udicial Branch wel	Petitioner what he or osite for Persons who are
contac	ct information available at: http://www.iowacourts.gov/Administr	ration/Directories/ADA_Access/.		

Rule 17.200-Form 208: Original Notice by Publication, continued

Newspaper: only publish the instructions below if your county uses electronic filing. To determine if your county uses electronic filing, check the map available on the Iowa Judicial Branch website under "eFiling," or call the clerk of court office in your county.

Additional Information for Respondent

- You must register to eFile through the Iowa Judicial Branch website at
 https://www.iowacourts.state.ia.us/Efile/ and obtain a log in and password to file and view documents in your case and to receive service and notices from the court.
- For general rules and information on electronic filing, refer to the Iowa Court Rules Chapter 16
 Pertaining to the Use of the Electronic Document Management System, available on the Iowa Judicial
 Branch website.
- For court rules on the Protection of Personal Privacy in court filings, refer to Division VI of the Iowa Court Rules, Chapter 16.

Rule 17.200—Form 209: Application and Affidavit to Defer Payment of Costs

Petitioner: Use this form only if you cannot afford to pay the fees to file and serve the Petition.

- Use this form if it would cause you to suffer a hardship if you had to pay the filing fee and cost of serving papers.
- You may need to provide proof of your income and assets and your expenses.
- Costs and fees paid to someone other than the court or sheriff cannot be waived. For example, you may have to pay to publish a legal notice in the newspaper or to hire an expert to testify.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for			County ounty where your case is filed					
Up	on	the Petition of	Equity case no.					
Petitioner Full name: first, middle, last			Application and Affidavit to Defer Payment of Costs					
and concerning								
Res	sp	ondent Full name: first, middle, last						
1.	Re	equest and Information						
	Α.	I am Petitioner.						
	B.	For my Application and Affidavit, I state that: Check all that apply						
		(1) I am unable to pay the filing fee or se	ervice costs or other court costs.					
		(2) ask the court for permission to prod	eed without prepayment of costs and fees.					
		(3) I am filing this Application and Affida	vit in good faith.					
		(4) I believe I am entitled to what I am a	sking for in this case.					
	C.	Household						
		There are $\underline{\hspace{1cm}}$ people living in my hous $\underline{\hspace{1cm}}$ Number	sehold.					
	D.	My household income is \$	•					
			efore deductions for all members of your household.					
	Ε.	My income comes from:	, wages, or benefits such as unemployment, Title 19, FIP.					
		List the sources of your income. Examples: salary	, wages, or venejus such as unemployment, 1 the 19, 111.					
		Continu	ed on next page					

Rule 17.200—Form 209: Application and Affidavit to Defer Payment of Costs, continued

F.	My household has the following monthly expenses:				
	(1) Rent or mortgage	\$			
	(2) Utilities	\$			
	(3) Phone	\$			
	(4) Food	\$			
	(5) Transportation	\$			
G	I have \$	in cash, checking, and savings			

Continued on next page

Rule 17.200—Form 209: Application and Affidavit to Defer Payment of Costs, continued

2.	Attorney Help Check one							
	_		au fill in Alain mana	_				
	A. An attorney did not help me prepare or fill in this paper.B. An attorney helped me prepare or fill in this paper.							
	B. An attorney helped me If you check B, you must fill	-						
	Name of attorney or organi	zation, if any	Attorney's P.I.N	I. # -Ask the attori	пеу			
	Business address of attorne	y or organizatio	n City	State	ZIP code			
	()	()					
	()_ Attorney's phone number	Attorney'.	s fax number – optional	Attorney's ema	il address – optiona			
٥.	Section 3 to be completed only if filithis document, if filed electronically	ng in paper or i y, will automatio	f the other party is exe cally be served on regi	stered parties.				
	I,	, c	ertify that on		, 20			
	•							
	I mailed or gave a copy of this Ap at this address:	phication and A	Amaavit to the other	party of the other	party's attorney			
	at this address.							
	Name of person to whom I delivered							
	Name of person to whom I delivered	or manea n						
	D 12 11 11		711		710 1			
	Party's or attorney's mailing addres	3 (City	State	ZIP code			
4.	Oath and Signature							
	I,Print your name	certify un	der penalty of perio	ırv and pursuant	to the laws of			
	Print your name	, oorany arr	dor portately or porje	iry and parodam				
	the State of Iowa that I have read this Application and Affidavit and that the information I have							
		provided in this Application and Affidavit is true and correct.						
	Signed on: Month Day	20	Your signature*					
	Signed on: Monin Day	1 ear	our signature					
	Mailing address	(City	State	ZIP code			
	()							
	Phone number En	nail address	Ad	lditional email addi	ess – if available			
	* Whether filing electronically or in pap scan the form after signing it and then			this form. If you are	filing electronically,			
Dec	cember 2013	Rule 17	.200—Form 209		Page 3 of 3			

January 2014

Rule 17.200—Form 210: Affidavit of Service of Original Notice and Petition for Dissolution of Marriage

Petitioner: Use this form only if someone other than Petitioner (you), or a person who is not a sheriff or a process server, delivered a copy of the Petition and Original Notice to Respondent (your spouse).

- The person, other than Petitioner, who gave the Petition and Original Notice to Respondent, fills in this form.
- Petitioner, or the person who gave the Petition and Original Notice to Respondent, must file this form with the clerk of court.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

	In the Iowa Di	strict Court for _			County			
			County where F	County where Petition is filed				
Up	Jpon the Petition of			ase no				
Petitioner Full name: first, middle, last			Affidavit of Service of C Notice and Petition Dissolution of Marri					
an	d concerning				90			
Re	spondent Full name	e: first, middle, last	_					
 1.	Affidavit		l					
	I,		, delivered a	a copy of the Origina	al Notice and			
	I,, delivered a copy of the Original Notice and Name of person - Cannot be Petitioner, sheriff, or process server							
	Petition for Dissolution of Marriage for this case to:							
					◯a.m.			
		on <i>Mo</i>		, 20 at	O p.m.			
	Name of Respondent	Mo	onth I	Day Year T	ime -			
	by handing Respondent copies of the attached papers.							
_								
2.	Oath and Signature							
		To be completed by the person who gave the Petition and Original Notice to Respondent.						
			, have read	this Affidavit of Serv	/ice, and I certif			
	Print your name							
	under penalty of perjury and pursuant to the laws of the State of lowa that the information I							
	have provided in this Affidavit of Service is true and correct.							
		, 20						
	Signed on: Month	Day Year	Your signature*					
	Mailing address		City	State	ZIP code			
	() Phone number	 Email address	,		dress – if available			
	* If you are filing electron	nically, scan the form after	signing it and then file	electronically.				
	ember 2013	D.:	lo 17 200 Farm 240		Dama 4 -6			
⊔ec	enner zu is	Ru	le 17.200—Form 210		Page 1 of			

[Court Order December 19, 2013]

Rule 17.200—Form 211: Protected Information Disclosure

It is the responsibility of counsel, if any, and the parties to ensure that protected information is omitted or redacted from documents or exhibits filed with the court. The clerk of court will not review filings to determine whether the required omissions or redactions have been made. For electronic filers, see Division VI of chapter 16 of the Iowa Court Rules. For paper filers, see Iowa Rule of Civil Procedure 1.422.

Use this form to identify the full version of any protected information redacted in other documents you have filed.

■ If filing electronically:

- Petitioner must complete this form (211) and file it with the Petition (201) and Original Notice (204).
- Respondent must complete this form if adding or correcting protected information.
- Paper filers also may use form 211 to assist in complying with Iowa Rule of Civil Procedure 1.422.

If you do not understand how to use this form, or if you should use this form, talk to an attorney

In the lowa District Court for	County where the case is filed
Upon the Petition of	Equity case no
Petitioner Full name: first, middle, last	Protected information disclosure
and concerning	
Respondent Full name: first, middle, last	_
	ourt Rule 16.602, is required by law to be included or is onfidential documents, a party shall include the protect

For an explanation of a filer's responsibility and the procedures to use for protecting personal information, refer to lowa Court Rules: Chapter 16, Rules Pertaining to the Use of the Electronic Document Management System, Division VI, Protection of Personal Privacy. Rule 16.602 provides the list of protected information. Rule 16.604 provides a list of information that may be redacted.

1. Petitioner The spouse who filed for divorce.

Provide the complete version of protected information and the redacted version included in documents you file.

Name

 \overline{Last} First Middle **Protected Information Type** Redacted Information Complete Information (See Rules 16.602 and 16.604) (See Rule 16.605) A. Social security number XXX-XX-XXXX Last four digits only B. Financial account numbers Partial account number only Full account number C. Date of birth mm/dd/yyyy Year only D. Individual taxpayer identification numbers XXX-XX-XXXX Last four digits only

Rule 17.200—Form 211: Protected Information Disclosure, continued

E.	Personal identification numbers	Full number	Partial only
F.	Other unique identifying numbers	Full number	Partial only
G.			
	Additional protected information	Full information	Partial information
H.			
	Additional protected information	Full information	Partial information
l.			
	Additional protected information	Full information	Partial information
J.			
	Additional protected information	Full information	Partial information

2. Respondent The spouse who did not file for divorce.

Additional protected information

Provide the complete version of protected information and the redacted version included in documents you file. If Petitioner is filling out this form, provide as much information about Respondent as you can.

First	Middle Lasi	
Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
A. Social security number	XXX-XX-XXXX	Last four digits only
B. Financial account numbers	Full account number	Partial account number only
C. Date of birth	/ mm/dd/yyyy	Year only
D. Individual taxpayer identification numbers	 XXX-XX-XXXX	Last four digits only
E. Personal identification numbers	Full number	Partial only
F. Other unique identifying numbers	Full number	Partial only
G. Additional protected information	Full information	Partial information
H. Additional protected information	Full information	Partial information
l. Additional protected information	Full information	Partial information
J.		

Full information Check this box if you are attaching a separate sheet listing additional information for Respondent.

Partial information

Check this box if you are attaching a separate sheet listing additional information for Petitioner.

Rule 17.200—Form 211: Protected Information Disclosure, continued

3. Other Parties

Provide the complete version of protected information and the redacted version included in documents you file. Provide as much information about other parties as you can.

First	Middle Last	
Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
A. Social security number	 XXX-XX-XXXX	Last four digits only
B. Financial account numbers	Full account number	Partial account number only
C. Date of birth	/ / mm/dd/yyyy	Year only
D. Individual taxpayer identification numbers	 XXX-XX-XXXX	Last four digits only
E. Personal identification numbers	Full number	Partial only
F. Other unique identifying numbers	Full number	Partial only
G.		
Additional protected information	Full information	Partial information
H. Additional protected information	Full information	Partial information
l. Additional protected information	Full information	Partial information
J. Additional protected information	Full information	Partial information

4. Children

Provide the complete version of protected information and the redacted version included in documents you file.

Α.	Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)	
	(1) Child's full name	First, middle, last name	Child's initials	
	(2) Social security number	 XXX-XX-XXXX	Last four digits only	
	(3) Date of birth	/ mm/dd/yyyy	Year only	

Check this box if you are attaching a separate sheet listing additional information for other parties.

Rule 17.200—Form 211: Protected Information Disclosure, continued

B.	Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
	(1) Child's full name	First, middle, last name	Child's initials
	(2) Social security number	 <i>XXX-XX-XXXX</i>	Last four digits only
	(3) Date of birth	/ / mm/dd/yyyy	Year only

C.	Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)	
	(1) Child's full name	First, middle, last name	Child's initials	
	(2) Social security number	 XXX-XX-XXXX	Last four digits only	
	(3) Date of birth	/ / mm/dd/yyyy	Year only	

D.	Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)	
	(1) Child's full name	First, middle, last name	Child's initials	
	(2) Social security number	 XXX-XX-XXXX	Last four digits only	
	(3) Date of birth	mm/dd/yyyy	Year only	

E.	Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)	
	(1) Child's full name	First, middle, last name	Child's initials	
	(2) Social security number	 XXX-XX-XXXX	Last four digits only	
	(3) Date of birth	/ / mm/dd/yyyy	Year only	

Continued on next page

 $Rule\ 17.200-Form\ 211: \textit{Protected Information Disclosure},\ continued$

5.	Information provided by:	

		/S/			
Handwritten signature of Petitioner or attorney if filing in paper		Electronic si if filing elect		itioner or attorney	
Law firm, if applicable		-			
Mailing address	City		State	ZIP code	
() Phone number					
Email address		Additional emai	l address, if ap	pplicable	
Month Day Day Date information provided	Year				

January 2014

Rule 17.200—Form 215: Answer to Petition for Dissolution of Marriage with Children

Respondent: You must file an Answer in the county where the Petition was filed within **20 days** after receiving the Petition and Original Notice, or the **court may enter a judgment against Respondent** giving Petitioner what he or she asked for in the Petition.

- Read the <u>Guide to Representing Yourself in an Iowa Divorce Case with Children</u> on the Iowa Judicial Branch website before using this form.
- Use this Answer form 215 if you received Petition form 201, otherwise use form 216.
- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (211) if you have not already done so.
- If filing in paper, you may use form 211.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for	where your spouse filed the Petition	County		
Upon the Petition of	Equity case no			
Petitioner Your spouse's full name: first, middle, last	Answer to Petition for D of Marriage with Ch			
and concerning				
Respondent Your full name: first, middle, last				
Personal Information Fill in all information the	at you know.			
 A. Petitioner's information Check one If paragraph 1A of the Petition (form 201) is not correct, check (2) and fill in the blanks. (1) Petitioner's (your spouse's) birth year and present residence are correct in the Petition. (2) Petitioner's birth year and present residence are not correct in the Petition. The correct information is: Birth year 				
Present street address	City State	ZIP code		
B. Respondent's information Check one If paragraph 1B of the Petition (form 201) is not		s.		
 (1) Respondent's (your) birth year and present respondent's birth year and present respondent is: The correct information is: Birth year 				

County Phone number Email address C. Other person, if any, who has visitation or custody rights of the parties' children: Fill in as much information as you know. Check one If paragraph 1C of the Petition (form 201) is not correct, check (2) and fill in the blanks. (1) The information for the other person who has visitation or custody rights of the childre correct in the Petition. (2) The information for the other person who has visitation or custody rights of the childre correct in the Petition. The correct information is: Full name: first, middle, last Present street address City State ZIP code County Phone number Email address General Information About the Marriage and the Parties A. Date and location of the marriage Check one If paragraph 2A of the Petition (form 201) is not correct, check (2) and fill in the blanks. (1) The date and location of the marriage are correct in the Petition.									
Fill in as much information as you know. Check one If paragraph 1C of the Petition (form 201) is not correct, check (2) and fill in the blanks. (1) The information for the other person who has visitation or custody rights of the childre correct in the Petition. (2) The information for the other person who has visitation or custody rights of the childre correct in the Petition. The correct information is: Full name: first, middle, last Present street address City State ZIP code County Phone number Email address General Information About the Marriage and the Parties A. Date and location of the marriage Check one If paragraph 2A of the Petition (form 201) is not correct, check (2) and fill in the blanks.									
Fill in as much information as you know. Check one If paragraph 1C of the Petition (form 201) is not correct, check (2) and fill in the blanks. (1) The information for the other person who has visitation or custody rights of the childre correct in the Petition. (2) The information for the other person who has visitation or custody rights of the childre correct in the Petition. The correct information is: Full name: first, middle, last									
Check one If paragraph 1C of the Petition (form 201) is not correct, check (2) and fill in the blanks. (1) The information for the other person who has visitation or custody rights of the childre correct in the Petition. (2) The information for the other person who has visitation or custody rights of the childre correct in the Petition. The correct information is: Full name: first, middle, last									
(1) The information for the other person who has visitation or custody rights of the childre correct in the Petition. (2) The information for the other person who has visitation or custody rights of the childre correct in the Petition. The correct information is: Full name: first, middle, last									
correct in the Petition. (2) The information for the other person who has visitation or custody rights of the childre correct in the Petition. The correct information is: Full name: first, middle, last									
correct in the Petition. The correct information is: Full name: first, middle, last									
Present street address City State ZIP code County Phone number Email address General Information About the Marriage and the Parties A. Date and location of the marriage Check one If paragraph 2A of the Petition (form 201) is not correct, check (2) and fill in the blanks.									
County Phone number Email address General Information About the Marriage and the Parties A. Date and location of the marriage Check one If paragraph 2A of the Petition (form 201) is not correct, check (2) and fill in the blanks.									
General Information About the Marriage and the Parties A. Date and location of the marriage Check one If paragraph 2A of the Petition (form 201) is not correct, check (2) and fill in the blanks.									
General Information About the Marriage and the Parties A. Date and location of the marriage Check one If paragraph 2A of the Petition (form 201) is not correct, check (2) and fill in the blanks.									
Check one If paragraph 2A of the Petition (form 201) is not correct, check (2) and fill in the blanks.									
Check one If paragraph 2A of the Petition (form 201) is not correct, check (2) and fill in the blanks.									
(1) Since date and resident of the manage are contour in the relation.									
(2) O The date and location of the marriage are not correct in the Petition.									
The correct information is:									
Month Day Year City									
B. Children									
Check one									
If paragraph 2B of the Petition (201) is not correct, check (2) and all items that are true.									
(1) The Petition provides the correct information about the children.									
(2) The Petition does not provide the correct information about the children.									
(2) I he Petition does not provide the correct information about the children. The correct information is:									
The correct information is: a. There are children under age 18 who are children of both Petitioner									
 The correct information is: a. There are children under age 18 who are children of both Petitioner and Respondent. b. There are children under age 18 who were adopted or born during this marriage. This includes any child born to a spouse during the marriage, but for whom the content is the content of the c									
 The correct information is: a. There are children under age 18 who are children of both Petitioner and Respondent. b. There are children under age 18 who were adopted or born during this marriage. 									

Rule 17.200—Form 215: Answer to Petition for Dissolution of Marriage with Children, continued

\sim	1-1-		c:	4:	- 5	-1-:	1_1	
U.	ıae	enu	пса	tion	OI	cni	ıa	ren

Check one

If paragraph 2C of the Petition (201) is not correct, check (2) and provide the correct information about the children's identification.

(1) The children are identified correctly in the Petition.

(2) The children are not correctly identified in the Petition. The correct information is:

First, middle, & last initials of each child	Birth year
a.	
b.	
c.	

First, middle, & last initials of each child	Birth year
d.	
e.	
f.	

☐ Check this box if you have attached a separate sheet listing additional children.

D. Children's living arrangements

Check one

If paragraph 2D of the Petition (201) is not correct, check b and provide the correct information about the children's residence.

i.	Children:	Initials	Initials	Initials	,	Initials	<u>Ini</u>	tials	_
	Lived with	1 Adult name		_ from	$\frac{1}{n} / \frac{1}{dd}$	/	_ to	_ / <u></u>	_ /
	At City	110mil Hame		State		7777		Citi	<i>3333</i>
ii.	Children:	Initials	Initials		,	Initials		tials	
	Lived with	1 Adult name		_ from	$\frac{1}{n} \frac{1}{dd}$	/	_ to	_	_/
	At			State	<u>, </u>	2000			2222
iii.	Children:	Initials	Initials	 Initials		Initials	<u>I</u> ni	tials	_
	Lived with			—	/	/	_ to	_/	_/
	Lived with $At {City}$	Adult name		mr		/	to m	_ / <u>dd</u>	_ /
iv	Children:								

Rule 17.200-Form 215: Answer to Petition for Dissolution of Marriage with Children, continued Lived with Adult name City State Children: Initials Initials Initials **Initials** Initials Lived with mmState Check this box if you have attached a separate sheet listing additional children. If the children have been in Iowa for less than six months, the court may not be able to issue an order about custody or visitation. The rules are complicated, and you may need to talk to an attorney. E. Petitioner's residence (1) The **only** reason that Petitioner (your spouse) is living in lowa is just to get a divorce. True False If Petitioner does not live in Iowa, or if Petitioner lives in Iowa for reasons other than just to get a divorce, check "False." (2) If you disagree with paragraph 2E(2) of the Petition (201), fill in the blanks. Petitioner has lived in Iowa for the last _____ years and ____ months __ county. F. Parties' residence Check each that is true (1) Petitioner (your spouse) has lived in Iowa for more than one year. If you did not check (1) or (2), you should talk to an attorney. (2) Respondent (you are Respondent) is a resident of Iowa. G. Condition of the marriage Check all that are true (1) The marriage is broken and cannot be saved. This is the only divorce case going on in involving this marriage. If you did not check (2), explain in 4. You should also talk to an attorney. (3) Petitioner did not file the Petition in good faith for the purpose of ending the marriage. (4) Counseling will not save the marriage. If counseling may save the marriage, do not check (4). H. Respondent's status Check each that is true

There are special rules that may prevent this dissolution from going forward if you are in the

Respondent (you are Respondent) is in the military service.

military. You should talk to an attorney.

Rul	e 17.2	00—For	m 215:	Answe	er to Petition for Dissolution of Ma	rriage with Children, cont	inued	
		(2) [] Re	espo	ndent is in prison or jail at	: Name of facility		in
					are in prison or jail, you may y, appointed to protect the ir	be entitled to a "gua		
	I.	Prote	ective	or r	no contact orders			
		Chec	k one					
		(1) (is neither a "protective ordener (your spouse).	er" nor a "no contact	order" between Res	spondent (you) and
		(2)			s a "protective order" or "ne heck (2), fill in the following		ween Respondent a	nd Petitioner.
			a.		unty and state where the ord	der came from:		
					•	Coun	ty	State
			b.	Со	urt case number:			
3.	Ot	her (Case		bout the Children			
		eck A c						
	A.				nformation in 3 in the Pe	tition about other	cases about the c	hildren is correct.
	B.	If you (1)	childre check luven Check	en is kB, file con a or l The you con l	b. ere is no juvenile court case ere is a juvenile court case. sheck b, fill in the following	ect information is: a below. The correct information is:		about the
			i.	Co	unty and state of the juvenile	e court case: <i>County</i>		State
			ii.	Со	urt case number:			
				Ch	eck one			
				(a)	☐ Concurrent jurisdiction	n has been granted.		
				(b)	☐ Concurrent jurisdiction	n has not been grante	ed.	
					If the juvenile court has not g be decided in this case. You			n child custody cannot
			Custo	•				
		(Check					
		a			ere is no custody order.			
		t). <u>(</u>	-	ere is a custody order. Sheck b, fill in the following	information:		
			1) ,	i.	County and state where th		e from:	
				1.	County and state where th	c castoay order carrie	County	State
				ii.	Court case number:			

Rule 17.200-Form 215: Answer to Petition for Dissolution of Marriage with Children, continued (3) Child support order Check a or b. There is no child support order. There is a child support order. If you check b, fill in the following information: County and state where the child support order came from: County State Court case number: 4. Other Information Respondent denies anything in the Petition that Respondent has not agreed is correct. In addition, Respondent provides the following information: All of the basic information you need to tell the court is on this form. Provide other information only if you need to explain something. 5. Respondent's Request A. Respondent asks the court to: Check all that apply. The court will only consider items that are checked. If you do not know what you want, talk to an attorney. (1) End the marriage of Respondent (you) and Petitioner (your spouse). Decide custody and visitation. (3)
Order child support and medical support. (4) Order payment of school or college tuition. (5) Fairly divide the property and the debts of the parties. (6) Order that Petitioner pay the court fees. (7) Order that Petitioner pay for Respondent's attorney's fees before the divorce is final If you check (7), you must file form 222. (8) Order that Petitioner pay spousal support (alimony) to Respondent. If you check (8), you must file form 222. (9) Change Respondent's last name to: Name can only be changed to name on birth certificate or name used immediately prior to the marriage. Print your former or birth name (10) Order counseling to save the marriage.

(11) Other request:

 $Rule~17.200\\ --Form~215: \textit{Answer to Petition for Dissolution of Marriage with Children}, continued$

6.	Attorney Help Check one										
	A. An attorney did not help me prepare or fill in this paper.										
	B. An attorney helped me prepare or fill in this paper. If you check B, you must fill in the following information:										
	Name of attorney or organization, if any $ Attorney's P.I.N. # - Ask the attorney $										
	Business address of attorney or organization City State ZIP code										
	(
	Service Instructions If Respondent is filing in paper Check one A. Respondent will accept service of documents at the attorney's address listed above; or B. Respondent will accept service of documents in this case at the mailing address below. Certification of Service by Mailing or Delivery Section 8 to be completed only if filing in paper or if the other party is exempt from electronic filing.										
	This document, if filed electronically, will automatically be served on registered parties.										
	I,, certify that on, 20										
	I mailed or gave a copy of this Answer to the other party or the other party's attorney at this address:										
	Name of person to whom I delivered or mailed it										
	Party's or attorney's mailing address City State ZIP code										

Continued on next page

Rule 17.200—Form 215: Answer to Petition for Dissolution of Marriage with Children, continued

Oath and Signa	ture					
I,			_, have read this	Answer, an	d I certify	under penalty
Print your name			0			
of perjury and purs in this Answer is tr			e State of Iowa t	that the infor	mation I	nave provided
		, 20				
Signed on: Month	Day	Year	Your signature*	:		
Mailing address			City		State	ZIP code

Important Instructions for filing this form on next page.

Instructions for Rule 17.200-Form 215: Answer to Petition for Dissolution of Marriage with Children, continued

Do not file these instructions

Instructions for Filing an Answer to a Petition for Dissolution of Marriage with Children

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, check the map available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, you must file electronically unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

■ Filing your Answer electronically

- If your divorce case was filed in a county that uses electronic filing, you must register to electronically
 file. For help with registration, see the eFiler's User Guide <u>How to Register Pro Se (Self Represented)</u>
 for eFiling on the Iowa Judicial Branch website.
- Scan the signed Answer form and save it as a .pdf. (Save it in a place that will be accessible to you
 when you electronically file.)
- Log in to EDMS on the Iowa Judicial Branch website and file your Answer.
 The login page can be accessed from two different paths: you may <u>directly log in to EDMS</u>; or from the judicial branch website menu, you may select "eFiling > eFile (EDMS) Login."
- For help, see How to eFile to an Existing Case.
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the efiling of
 your Answer and other documents. You can then open the Answer and print a copy for your records.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My
 Filings, correct the error, and resubmit your Answer. For help, see <u>How to Resubmit a Returned Filing</u>.
- The NEF will indicate if your spouse is exempt from electronic filing requirements, in which case, you must
 mail or serve in paper a copy of the document on your spouse if he or she does not have an attorney.

Filing your Answer in paper

- Make two photocopies of the original.
- Take your original Answer form and the photocopies to the clerk of court's office in the county where
 the Petition was filed. The county is listed at the top of the Petition (form 201).
- The clerk will time-stamp your forms and copies.
- The clerk will take the original and give the copies back to you.
- Keep one of the copies for your records.
- Serve one of the copies of your Answer on your spouse (Petitioner).
- You can hand one of the copies of the Answer form to your spouse, or mail a copy to your spouse at the address shown on the Petition.
- If your spouse has an attorney, you should serve the Answer by mailing a copy to the attorney at the
 attorney's address on the Petition if box 7A on the Petition is checked.

Do not file these instructions

December 2013 Instructions for Rule 17,200—Form 215

Page 1 of 1

Rule 17.200—Form 216: General Answer to a Petition for Dissolution of Marriage with Children

Respondent: You must file an Answer in the county where the Petition was filed within **20 days** after receiving the Petition and Original Notice, or the **court may enter a judgment against Respondent** giving Petitioner what he or she asked for in the Petition.

If the Petition you received is on form 201, use form 215 for your Answer.

Read the <u>Guide to Representing Yourself in an Iowa Divorce Case</u> on the Iowa Judicial Branch website before using this form.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (211).
- If filing in paper, you may use form 211 to provide any protected information in full.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for	County where Petition is filed
Upon the Petition of	Equity case no
Petitioner You spouse's full name: first, middle, last	General Answer to a Petition for Dissolution of Marriage
and concerning	with Children
Respondent Your full name: first, middle, last	

- 1. Respondent's Answer You are Respondent.
 - A. Respondent admits that the following paragraphs in the Petition are true:

List the numbers of the paragraphs in the Petition that you think are true. If you decide later that the paragraphs you list here are not true, it may be too late to change your answer.

- B. Respondent denies that the following paragraphs in the Petition are true:
- C. Respondent does not know whether the following paragraphs in the Petition are true:

List the numbers of the paragraphs in the Petition that you are not sure about. If you cannot say a paragraph or a part of a paragraph is true or not true, it may be because you do not know something, such as a date, place, or when something happened.

Rule 17.200—Form 216: General Answer to a Petition for Dissolution of Marriage with Children, continued

D. Children's living arrangements

Places where the children have lived during the last five years and the parent(s) or adult(s) who acted as parents:

(1)	Children: Ini	tials	Initials		Initials		- In	itials		Initi	ials	
	Lived with _				from		/	/	to		/	/
		1dult name				mm	dd	yyyy y		mm	dd	yyyy
	At				_							
	City			State	?							
(2)	Children: Ini											
	Ini	tials	Initials		Initials		In	itials		Initi	ials	
	Lived with										/	_/
	Lived with _	1dult name				mm	dd	уууу		mm	dd	уууу
	At			~	_							
	City			State	2							
(3)	Children:									_		
	Ini	tials	Initials		Initials		In	itials		Initi	ials	
	Lived with _	1dult name									/	_/
						mm	dd	уууу		mm	dd	уууу
	At			State								
				Siun								
(4)	Children:	tials	Initials		Initials		_ <u></u>	itials		Init	ials	
	1/11											
	Lived with	1 <i>dult name</i>			from	102102	-/ 	_/	_ to	100100	-/	_/
						mm	ии	уууу		mm	аа	уууу
	At			State	2							
(5)	Ola i I alaa aa											
(5)	Children: <u>Ini</u>	tials	Initials		Initials		_ <u>In</u>	itials		Initi	ials	
	l i a al itla				£		,	,	4-		,	,
	Lived with _	1dult name			Trom	\overline{mm}	- ' <u></u>	- [/]	_ 10	mm	- ' <u></u>	- [/]
	At			State	2							
	☐ Check thi	s box if you ho	ave attached o	a sepa	rate she	et listi	ng ada	ditional ch	iildre	en.		
	If the child	ren have not liv	ved in Iowa for	six mo	onths, you	ı may l	be able	to get a di	vorce	, but y	∕ou mig	ght not be
	able to get	custody. The r	utes are compli	cated	and you i	nay ne	ed to ta	uk to an att	torney	у.		

Rule 17.200—Form 216: General Answer to a Petition for Dissolution of Marriage with Children, continued

Ε.				or no contact orders	
		eck o			
	(1)	0		ere is neither a "protective order" nor a "no contact order" between Respon titioner (your spouse).	dent (you) and
	(2)	0	The	ere is a "protective order" or "no contact order" between Respondent and F	etitioner.
			If y	ou check (2), fill in the following information:	
			a.	County and state where the order came from:	
				County	State
			b.	Court case number:	
F.	Oth	ner	case	es about the children	
	Che	eck (1) or	· (2)	
	(1)	0	The	ere are no other cases about the children. If you check (1), skip to G.	
	(2)	O	The	ere are other cases about the children.	
	abo	ut cu	ıstod	order from out of state about the children, an Iowa court may not be able to is by or visitation. The rules are complicated and you may need to talk to an attor $F(2)$, fill in the applicable information below.	
	a.			e court	
	u.			or ii.	
		i.		There is no juvenile court case.	
		ii.		There is a juvenile court case.	
			If y	ou check ii, fill in the following information:	
			(a)	County and state of the juvenile court case:	
				County	State
			(b)	Juvenile court case number:	
				Check (i) or (ii)	
				(i) Concurrent jurisdiction has been granted.	
				(ii) Concurrent jurisdiction has not been granted.	
				If the juvenile court has not given concurrent jurisdiction (permission,) then child be decided in this case. You should talk to an attorney.	d custody cannot
	b.	Cu	stod	y order	
				ght not be able to get custody in Iowa if there is a custody order entered in ano or ii.	ther state.
		i.	ck i	There is no custody order.	
		ii.	\coprod If y	There is a custody order. ou check ii, fill in the following information:	
			(a)	County and state where the custody order came from:	
				County	State
			(b)	Court case number:	

Rule 17.200-	Form 2	6: General Answer to a Petition for Dissolution of Marriage with C	hildren, continued	
C.	Child :	support order i <i>or</i> ii.		
	i. 🗆	There is no child support order.		
	ii.	There is a child support order.		
	If you	check ii, fill in the following information:		
	(a)	County and state where the child support order came from:	County	State
	(b)	Court case number:	-	
G. Re	espond	ent denies anything in the Petition that is not admit	ted in this Answer.	
H. Ot	her info	ormation:		

2. Respondent's Request If you do not know what you want, talk to an attorney.

Respondent asks the court to: Write here what you would like the court to do. For example, tell the court if you want a divorce. Be brief. Do not write long descriptions.

Continued on next page

Rule 17.200—Form 216: General Answer to a Petition for Dissolution of Marriage with Children, continued

3.	. Attorney Help			
	Check one			
	A. An attorney did not help me prepare			
	B. () An attorney helped me prepare or f			
	If you check B, you must fill in the followin	g information:		
	Name of attorney or organization, if any	Attorney's P.I.N. ‡	+ $ Ask$ the attorney	v
	Business address of attorney or organization	on City	 State	ZIP code
	()()	Attornev's email	address – optional
4	. Service Instructions	s june rum e er opnemu	Title, ite	opiiona
٠.	If Respondent is filing in paper			
	Check one			
	A. Respondent will accept service of do	ocuments at the attor	ney's address lis	ted above; or
	B. Respondent will accept service of do	cuments in this case :	at the mailing ad	dress below.
5.	. Certification of Service by Mailing or Section 5 to be completed only if filing in paper or i This document, if filed electronically, will automatic	f the other party is exemp		ling.
			-	. 20
	I,, C	Month		, <u>Year</u>
	I mailed or gave a copy of this Answer to the address:	ne other party or the o	other party's atto	orney at this
	Name of person to whom I delivered or mailed it			
	Party's or attorney's mailing address	City	State	ZIP code
6.	. Oath and Signature			
	I P	nave read this Answe	ar and I certify u	nder nenalty
	Print your name			
	of perjury and pursuant to the laws of the S in this Answer is true and correct.	State of lowa that the	information I ha	ve provided
	, 20	V *		
	Signed on: Month Day Year	Your signature*		
	Mailing address	City	State	ZIP code
			1	······································
	Phone number Email address * Whether filing electronically or in paper, you must han		tional email addres	
	scan the form after signing it and then file electronical		ы _з ыт. 4 уой аге зиг	aig eieca oracally,
	Important Instructions for	filing this form on next	: page.	

Instructions for Rule 17.200—Form 216: General Answer to a Petition for Dissolution of Marriage with Children

Instructions for Filing an Answer to a Petition for Dissolution of Marriage with Children

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, check the map available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, you must file electronically unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

☐ Filing your Answer electronically

- If your divorce case was filed in a county that uses electronic filing, you must register to electronically file.
 For help with registration, see the eFiler's User Guide <u>How to Register Pro Se (SelfRepresented) for eFiling</u> on the Iowa Judicial Branch website.
- Scan the signed Answer form and save it as a .pdf. (Save it in a place that will be accessible to you when
 you electronically file.)
- Log in to EDMS on the Iowa Judicial Branch website and file your Answer.
 The login page can be accessed from two different paths: you may <u>directly log in to EDMS</u>; or from the judicial branch website menu, you may select "eFiling > eFile (EDMS) Login."
- For help, see *How to eFile to an Existing Case*.
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the efiling of
 your Answer and other documents. You can then open the Answer and print a copy for your records.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My
 Filings, correct the error, and resubmit your Answer. For help, see <u>How to Resubmit a Returned Filing</u>.
- The NEF will indicate if your spouse is exempt from electronic filing requirements, in which case, you must
 mail or serve in paper a copy of the document on your spouse if he or she does not have an attorney.

Filing your Answer in paper

- Make two photocopies of the original.
- Take your original Answer form and the photocopies to the clerk of court's office in the county where
 the Petition was filed. The county is listed at the top of the Petition (form 201).
- · The clerk will time-stamp your forms and copies.
- The clerk will take the original and give the copies back to you.
- · Keep one of the copies for your records.
- Serve one of the copies of your Answer on your spouse (Petitioner).
- You can hand one of the copies of the Answer form to your spouse, or mail a copy to your spouse at the address shown on the Petition.
- If your spouse has an attorney, you may serve the Petition by mailing a copy to the attorney at the attorney's address.

Do not file these instructions

December 2013

Instructions for Rule 17.200-Form 216

Page 1 of 1

[Court Order December 19, 2013] Form 217 to Form 220: Reserved

Rule 17.200—Form 221: Affidavit for Temporary Custody and Visitation

Form 221 is for either party to tell the court about custody and visitation before the case is finished, or to have a witness tell the court about custody and visitation before the case is finished.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for	County where the case is filed
Upon the Petition of	Equity case no
Petitioner Full name as it appears on the Petition: first, middle, last	Affidavit for Temporary Custody and Visitation
and concerning	
Respondent Full name as it appears on the Petition: first, middle, last	
1. Statement A. My name is ${Full \ name \ of \ witness: \ first, \ middle,}$, last
B. My relationship to First, middle, last name of sis:	party; or initials of child (Do not use child's full name.)
	this Affidavit to determine temporary custody and were present in court, I would testify as follows:
☐ Check here if there are additional pages at	tached.
Contin	ued on next page

Rule 17.200—Form 221: Affidavit for Temporary Custody and Visitation, continued

2.	Attorney Help Check one							
	A. An attorney did not help me prepare or fill in this paper.							
	B. An attorney helpe If you check B, you n			r.				
	Name of attorney or	organization, if any	Attorney's	r P.I.N. # – Ask	the attorn	ney		
	Business address of a	attorney or organiza	ation City		State	ZIP code		
	()	()					
	()_ Attorney's phone num	nber Attorn	ey 's fax number – op	otional Attor	ney 's ema	til address – option		
	I, laws of the State of Iowa t in this Affidavit is true and	hat I have read t						
		, 20						
	Signed on: Month Da	y Year	Your signature*					
	Mailing address		City		State	ZIP code		
	()							
	Phone number	Email address		Additional e	email addi	ress – if available		
	* Whether filing electronically or scan the form after signing it a			ure on this form.	If you are	filing electronically		
	 If the witness is not Petitioner of If the witness is either Petition 	*		-				

Rule 17.200—Form 222: Motion in a Dissolution of Marriage with Children

Use this form if you want to ask the court to do something after your court case has already started.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the	Iowa District Court for	ounty wher	e your case is filed	Cour	nty
Upon the P	etition of	Equity	/ case no		
Petitioner	Full name: first, middle, last		Motion in a Dis Marriage with		
and concerni	ng				
Responden	f Full name: first, middle, last				
B. Res 1. Request A. I ask th Check al	ll that apply. If you check any box in A, you			aking this re	-
(1)	Change the hearing date that has be	en set for	Month	Day	, 20 <u> </u>
` '	Award me temporary financial suppo				
	Order temporary custody and visitation				
. , _	Order temporary child support and m	nedical sup	pport.		
	Order counseling (conciliation).				
` ,	Set a hearing date for a divorce Decr	•			
	Shorten the 90-day waiting period for				
` ' _	Award me attorney's fees before the				
. ,	Award spousal support (alimony) to r			- Deemand	
(10)	Order genetic testing to decide pater appear for testing.	nity and re	aquire that Petitione	r, Respond	ent, and child
(11)	Appoint an attorney to represent the	child (req	uired when asking to	o disestabli	sh paternity).
	Continued o	on next p	age		

rule 17.200—Form 222: Motion in a Dissolution of Marriage with Children, continued							
(12) Other request	Explain						
5 1 1: "							
B. I am making the requ	lest(s) in this Motion because:						

Continued on next page

Rule 17.200—Form 222: Motion in a Dissolution of Marriage with Children, continued

					Attorney Help Check one							
Α.	O An attorney	y did not hel	p me prepare	or fill in this paper								
B.	B. An attorney helped me prepare or fill in this paper. If you check B, you must fill in the following information:											
	Name of attor	mey or organi	zation, if any	Attorney's P.I.N.	# – Ask the attorn	ey						
	Business add	ress of attorne	y or organizatio	n City	State State	ZIP code						
	()	ione number	(_)	Attorney's emai	il address _ optio						
Sec		eted only if filin	ng in paper or if	the other party is exenally be served on regis		filing.						
Ι, _			, c	ertify that on		, 20						
\overline{P}	rint your name			Month	Day	Year						
				7:4								
Par	rty's or attorney's n	nailing addres	s (City	State	ZIP code						
	rty's or attorney's nath and Signat	_		•								
Oa	ath and Signa	_		nty ertify under penalty								
Oa I, _ lav	ath and Signal Print your name vs of the State of	ture	, co	•	of perjury and pu	ursuant to the						
Oa I, _ law this	ath and Signate Print your name was of the State of State of State of State at the state of the State at the state of the State at the	f lowa that I hand correct.	, co nave read this I ask the court	ertify under penalty Motion and that the to grant this Motion	of perjury and pu	ursuant to the						
Oa I, _ law this	ath and Signal Print your name vs of the State of	ture	, co nave read this I ask the court	ertify under penalty Motion and that the	of perjury and pu	ursuant to the						
I, Flave this	ath and Signate Print your name was of the State of State of State of State at the state of the State at the state of the State at the	f lowa that I hand correct.	nave read this I ask the court 20	ertify under penalty Motion and that the to grant this Motion	of perjury and pu	ursuant to the						
Oa I, $\frac{1}{F}$ law this $\frac{1}{Sig}$	eth and Signal Print your name vs of the State of s Motion is true a line on: Month	f lowa that I hand correct.	nave read this I ask the court 20	ertify under penalty Motion and that the to grant this Motion Tour signature*	of perjury and pu e information I ha n.	ursuant to the						

December 2013

Rule 17.200—Form 223: Response to a Motion

Use this form if your spouse has filed a Motion (most likely form 222) and you disagree with what your spouse is asking the court to do in that Motion.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for	County where your case is filed
Upon the Petition of	Equity case no
Petitioner Full name: first, middle, last	Response to a Motion
and concerning	
Respondent Full name: first, middle, last	_
I am Check one A. Petitioner B. Respondent 1. Motion The other party filed a Motion on Month 2. Response Check A or B. A. I agree with the Motion. B. I disagree with the request(s) in the support of the following why you disagree with the request in C. (1) Change the hearing date that (2) Order temporary financial sure (3) Order temporary custody and (4) Order temporary child support (5) Order counseling (conciliation)	at has been set for
 (6) ☐ Set a hearing date for a divo (7) ☐ Shorten the 90-day waiting p (8) ☐ Award attorney's fees before 	period for getting a divorce Decree.
•	nony) before the divorce is final.

Rule 17.200—Form 223: Response to a Motion, continued
(10) Order genetic testing to decide paternity and require that Petitioner, Respondent, and child appear for testing.
(11) Appoint an attorney to represent the child (required when asking to disestablish paternity).
(12) Other request Explain
C. I disagree with the Motion because:

Continued on next page

Rule 17.200—Form 223: Response to a Motion, continued

	rney Help								
Check	_								
A. (A. On attorney did not help me prepare or fill in this paper.								
В. (An attorney helped								
	If you check B, you m	ust fill in the follow	ing information:						
	Name of attorney or o	raggination if any	Attornan's D	IN# Ask t	ha attarna	,			
	ivame of anomey or o	rganization, ij any	Autorney 31	11.1ν. π – Ask i	ne anorne,	V			
	Business address of at	torney or organizat	tion City		State	ZIP code			
	()_ Attorney's phone num	(
	Attorney's phone num	ber Attorne	y's fax number – op	tional Atto	rney 's ema	il address – optiona			
Sectio	tification of Service on 4 to be completed only document, if filed electron	if filing in paper or	if the other party			filing.			
I,	nt your name	,	certify that on _			, 20			
Pri	nt your name		i	Month	Day	y Year			
	's or attorney's mailing a	ddress	City		State	ZIP code			
	h and Signature								
	of the State of lowa the s Response is true and		iis Response an	d that the inf	ormation	I have provided			
Signe	d on: Month Day	, 20 Year	Your signature*						
3.6.11	ng address		City		State	ZIP code			
Maili									
Mailii ()								
Maili (Phone	e number	Email address		Additional	email addi	CESS – if available			
(Phone * Whe) e number ether filing electronically or n the form after signing it an	in paper, you must ha							
(Phone * Whe		in paper, you must ha							
(Phone * Whe		in paper, you must ha							
(Phone * Whe		in paper, you must ha							

Each party must complete one of these forms. Provide as much information as you can.

Caution: This form may require you to provide protected or sensitive information.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (211), if you have not already done so.
- If filing in paper, you may use form 211 to provide any protected information in full if you have not already done so.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for	County where your case is filed
Upon the Petition of	Equity case no.
Petitioner Full name: first, middle, last	Financial Affidavit for a Dissolution of Marriage with Children
Respondent Full name: first, middle, last	
l am	
Check one	
A. Petitioner	
B. Respondent	
l <u>,</u> Print your name	, state that this is a true and complete statement
of my assets, debts, and present in	come as of the $\underline{\hspace{1cm}}_{Day}$ day of $\underline{\hspace{1cm}}_{Month}$, 20 $\underline{\hspace{1cm}}_{Year}$
1. Assets Things you and your spouse own.	·
A. Real estate Attach additional sheets if necessary.	
*Owner (Whose name is on the deed?): $P = Pe$	etitioner $R = Respondent \ J = Joint (Both)$

Type of real estate	Owner*	Market value What it would sell for	Debt Total amount you still owe on it and to whom owed	Net value Market value minus debt owed
(1) Homestead Address of the home you own & where you usually live		\$	\$ to:	\$
(2) Other real estate Address of other houses, apartments, or land that you own.		\$	\$ to:	\$

[☐] Check this box if you have attached a sheet with additional information on real estate.

B. Vehicles

Includes cars, trucks, motorcycles, and other motorized vehicles.

*Owner (Whose name is on the car or vehicle title?): P = Petitioner R = Respondent J = Joint (Both)

Vehicles Make (e.g. Ford) Year	Owner*	Market value What it would sell for	Debt Total amount you still owe on it and to whom owed	Net Value Market value minus debt owed	
(1)		\$	\$	\$	
		Ψ	to:	Ψ	
(2)		\$	\$	Φ.	
		Φ	to:	\$	
(3)		c	\$	¢	
		\$	to:	\$	

[☐] Check this box if you have attached a sheet with additional information on vehicles.

C. Securities, stocks, & bonds

*Owner (Whose name is on the securities, stocks, or bonds?): P = Petitioner R = Respondent J = Joint (Both)

Securities, stocks, & bonds Company name	Owner*	Market value What it would sell for	Debt Total amount you still owe on it and to whom owed	Net value Market value minus debt owed
(1)		\$	\$	\$
(1)		Ψ	to:	P
(2)		\$	\$	\$
(2)		Φ	to:	Ф
(3)		\$	\$	\$
(3)		Φ	to:	Φ

[☐] Check this box if you have attached a sheet with additional information on securities, stocks, and bonds.

D. Life insurance

*Owner (Whose name is on the policy?): P = Petitioner R = Respondent J = Joint (Both)

Life insurance Company name	Owner*	Cash value Not death benefit	Loan from cash value Total amount still owed on loan	Net value Cash value minus loan owed
(1)		\$	\$	\$
(2)		\$	\$	\$
(3)		\$	\$	\$

[☐] Check this box if you have attached a sheet with additional information on life insurance.

E. Bank accounts

*Owner (Whose name is on the checking or savings account?): P = Petitioner R = Respondent J = Joint (Both)

Checking & savings accounts Bank or Credit Union name If you do not use bank accounts, write "Cash"	Owner*	Cash value	Personal loans or overdraft accounts Total amount you still owe on it	Net value Cash value minus loan / overdraft owed
(1)		\$	\$	\$
(2)		\$	\$	\$
(3)		\$	\$	\$

☐ Check this box if you have attached a sheet with additional information on checking and savings accounts.

F. Household contents

*Owner: P = Petitioner R = Respondent J = Joint (Both)

Household contents Describe	Owner*	Market value What it would sell for	Debt Total amount you still owe on it and to whom owed	Net value Market value minus debt owed
(1) Furniture			\$	
a.		\$	to:	\$
b.		\$	\$	\$
D.		Ψ	to:	Ψ
C.		\$	\$	\$
0.		Ψ	to:	Ψ
d.		\$	\$	\$
d.		Ψ	to:	Ψ
(2) Appliances / Electronics		\$	\$	\$
a.		Ψ	to:	Ψ
b.		\$	\$	\$
D.		Ψ	to:	Ψ
C.		\$	\$	\$
0.		Ψ	to:	Ψ
d.		\$	\$	\$
ч.		,	to:	Ψ
(3) Other contents		\$	\$	\$
a.		Ψ	to:	Ψ

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

b.	\$	\$ to:	\$
C.	\$	\$ to:	\$

☐ Check this box if you have attached a sheet with additional information on household assets.

G. Retirement assets

*Owner (Whose name is on the retirement account?): P = Petitioner R = Respondent J = Joint (Both)

Retirement assets Examples: Pensions, IRAs, 401(k)s, annuities, etc.	Owner*	Market value What it would sell for	Loan from retirement account Total amount you still owe on it and to whom owed	Net value Market value minus loan owed
(1)		\$	\$ to:	\$
(2)		\$	\$ to:	\$
(3)		\$	\$ to:	\$

☐ Check this box if you have attached a sheet with additional information on retirement assets.

H. Other assets

Items not listed in the other boxes should be listed here. For example: jewelry, furs, guns, sporting goods, farm animals.

*Owner: P = Petitioner R = Respondent J = Joint (Both)

Other assets Describe	Owner*	Market value What it would sell for	Debt Total amount you still owe on it and to whom owed	Net value Market value minus debt owed
(1)		\$	\$ to:	*
(2)		\$	\$ to:	\$
(3)		\$	\$ to:	\$

☐ Check this box if you have attached a sheet with additional information on other assets.

Totals

(1) Total from attached sheets	Listed in 1A-H.	\$
(2) Total net value of assets	Listed in 1A-H.	\$ 0.00

2. Other Debts

Debts may include things such as past due balances on utilities, money owed to a landlord for damages after moving, credit card debt, and loans from friends, family, or banks.

Include as "Other Debts" money you or your spouse owe that you did not include in the "Debt" or "Loan" columns in 1A-H.

*Whose debt is it? P = Petitioner R = Respondent J = Joint (Both)

Other debts List only those not included as "debt" or "loans" under "Assets" in part 1.	Whose debt?* P,R,J	Amount owed
A.		\$
В.		\$
C.		\$
D.		\$
E.		\$
F.		\$
G.		\$
H.		\$
L		\$
J.		\$
K.		\$
L.		\$
M.		\$
N.		\$
O. Totals from attached sheets, if any Check this box if you have attached a sheet with additional information on other debts and enter the total.		\$
Total other debts Including amounts shown on attached sheets, if any.		\$

Continued on next page

3. Income and Deductions

The deductions listed in section 3 are the deductions allowed by the Iowa Child Support Guidelines and are subtracted when determining net income.

A. Petitioner

(1) Income and Deductions If you are Respondent, give your best estimate for each amount. *How often is income paid or deduction taken?

 $W = Weekly \ B = Bi$ -weekly (every other week) $M = Monthly \ T = Two times a month$

Current income and deductions	Ir	ncome	Dec	luctions
for Petitioner Sources of income and deductions, not including Social Security benefits	How often paid?* W,B,M,T	Gross amount Before deductions	How often taken?* W,B,M,T	Amount of deduction
a. Wages from employer Employer name:		\$		\$
Job title: b. Wages from employer				
Employer name: Job title:		\$		\$
c. Unemployment assistance		\$		\$
d. Workers' compensation		\$		\$
e. Pension / Retirement		\$		\$
f. Veteran's benefits		\$		\$
g. Other <i>Identify:</i>		\$		\$
h. Other <i>Identify</i> :		\$		\$
i. Other Identify:		\$		\$
j. Mandatory pension contribution List required contribution only (e.g. IPERS, TIAA/CREF). Contributions above the required amount are optional and not allowed as a deduction.				\$
k. Union Dues				\$
**I. Prior court-ordered child support Paid to:				\$
**m Prior court-ordered medical support Paid to:				\$
**n. Prior court-ordered spousal support (alimony) Paid to:				\$
Totals from attached sheets, if any Check this box if you have attached a sheet with additional information on Petitioner's income and deductions.		\$		\$
Totals Current income and deductions for Petitioner		\$ 0.00 Income total		\$ 0.00 Deductions total

^{**}Under "Amount of deduction," list the amount of child support or spousal support actually paid under a prior court order (an order filed before this action). If child support payments were not made through the Child Support Recovery Unit, attach proof of payments for the past 12 months.

(2) Petitioner's other children with no court-orderd support, if any: If you are Respondent,

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

		st, middle, & last ials of each child	Birth year		middle, & last s of each child	Birth yea	r
	i.			iv.			
	ii.			v.			
	iii.			vi.			
		Check this box if you Petitioner is the lega		sheet listing	additional childre	n for whom	_
(3)		tioner's actual ch	_	ses due to	emplovment. i	f anv:	
		custodial parent only	-			-	
	\$.	pe	r Frequency				
		Amount	Frequency				
(4)	Peti	tioner's income fr	om Social Sec	curity bene	efits, if any:		
	a.	Supplemental Se	curity Income	(SSI), if a	ny:		
		i. Supplemental Sec	curity Income (SS	SI) paid to Pe	titioner for disabilit	ry: \$	per month
		ii. Supplemental Sec	curity Income (SS	SI) paid to ch	ildren for their disa	bility: \$	per month
		iii. List the children	in Petitioner's h	nome who r	eceive SSI bene	fits <i>Use initi</i>	ials only:
		First, middle, & initials of each		h year	First, middle initials of ea		Birth year
		(a)			(d)		
		(b)			(e)		
		(c)			(f)		
		Classic this b					
			oox if you have at al Security Incom		eet listing addition	al children w	ho receive
	b.		al Security Incom	ie (SSI).	_		
		Supplement	al Security Incom	ie (SSI).	_		
		Supplementa Social Security D i. Benefit paid for F	al Security Incom	ae (SSI).) or Social	Security Retire		R), if any :
		Supplementa Social Security D i. Benefit paid for F	al Security Incomisability (SSD) Petitioner each child in Petit	ne (SSI). or Social ioner's home	Security Retire	ment (SSR	R), if any :
		Supplemental Social Security D i. Benefit paid for Fig. Benefit paid for e	al Security Incomisability (SSD) Petitioner each child in Petite en receiving bene	ne (SSI). or Social ioner's home	Security Retire	ment (SSR	R), if any :
	c.	Supplemental Social Security D i. Benefit paid for Fiii. Benefit paid for eiii. Number of childr Social Security D	al Security Incomisability (SSD) Petitioner each child in Petite en receiving bene	ne (SSI). or Social ioner's home efits or if any:	Security Retire	ment (SSR	R), if any :
	c.	Supplemental Social Security D i. Benefit paid for F iii. Benefit paid for e iiii. Number of childr Social Security D ii. Paid to children f	al Security Incomisability (SSD) Petitioner each child in Petite en receiving beneficiability (SSD) for their disability	ne (SSI). or Social cioner's home efits or if any:	Security Retire \$ch	ment (SSR	R), if any: per month per month per month

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

First, middle, & last initials of each child	Birth year	First, r initials
(a)		(d)
(b)		(e)
(c)		(f)

First, middle, & last initials of each child	Birth year
(d)	
(e)	
(f)	

[☐] Check this box if you have attached a sheet listing additional children who receive Supplemental Security Income (SSD).

B. Respondent

(1) Income and Deductions If you are Petitioner, give your best estimate for each amount.

*How often is income paid or deduction taken?

 $W = Weekly \quad B = Bi$ -weekly (every other week) $M = Monthly \quad T = Two times a month$

Current income and deductions	Ir	ncome	Deductions	
for Respondent Sources of income and deductions, not including Social Security benefits	How often paid?* W,B,M,T	Gross amount Before deductions	How often taken?* W,B,M,T	Amount of deduction
a. Wages from employer Employer name: Job title:		\$		\$
b. Wages from employer Employer name: Job title:		\$		\$
c. Unemployment assistance		\$		\$
d. Workers' compensation		\$		\$
e. Pension / Retirement		\$		\$
f. Veteran's benefits		\$		\$
g. Other Identify:		\$		\$
h. Other Identify:		\$		\$
i. Other Identify:		\$		\$
j. Mandatory pension contribution List required contribution only (e.g. IPERS, TIAA/CREF). Contributions above the required amount are optional and not allowed as a deduction.				\$
k. Union Dues				\$
**I. Prior court-ordered child support Paid to:				\$
**m.Prior court-ordered medical support Paid to:				\$
**n. Prior court-ordered spousal support (alimony) Paid to:				\$

Rule 17.200—	Form 224: Financial Affidavi	it for a Dissolution	of M	larriage w	ith Children, contir	iued	
☐ Check th	rom attached sheets, if any his box if you have attached a hal information on Responden hons.				\$		\$
Totals Current inco	me and deductions for Respo	ndent			\$ 0.00 Income total		\$ 0.00 Deductions total
(an order fi	ount of deduction," list the ar led before this action). If chil ments for the past 12 months	d support payment					
(2)	Respondent's other of provide as much informat		o co	ourt-orde	erd support, if	any: If you	are Petitioner,
	List the initials and birth y Do not include any childs	•			espondent is the l	egal parent.	
	First, middle, & last initials of each child	Birth year			niddle, & last of each child	Birth year	
	i.			iv.			
	ii.			v.			
	iii.			vi.			
	Check this box if you Respondent is the leg		shee	t listing a	ıdditional childre	n for whom	
, ,	Respondent's actual For custodial parent only.	•					
	\$ per	Frequency	_				
(4)	Respondent's income			-	_		
	a. Supplemental Seci. Supplemental Sec	•	`	•		ility: \$	per month

- ii. Supplemental Security Income (SSI) paid to children for their disability: \$_____per month
- iii. List the children in Respondent's home who receive SSI benefits Use initials only:

First, middle, & last initials of each child	Birth year	First, middle, & last initials of each child	Birth year
(a)		(d)	
(b)		(e)	
(c)		(f)	

☐ Check this box if you have attached a sheet listing additional children who receive Supplemental Security Income (SSI).

b.	Social Security Disabil	ity (SSD) or Se	ocial Sec	urity Retire	ment (SSR)	, if any:
	i. Benefit paid for Respo	ndent		\$		per month
	ii. Benefit paid for each c	hild in Responder	nt's home	\$		per month
	iii. Number of children rec	eiving benefits		chi	ldren	
c.	Social Security Disabil	ity (SSD), if ar	ny:			
	i. Paid to children for the	ir disability:		\$		per month
	ii. List the children in Res	pondent's home	who receive	e SSD benefit	s Use initials o	nly:
	First, middle, & last initials of each child	Birth year		First, middle initials of ea		Birth year
	(a)			(d)		
	(b)			(e)		
	(c)			(f)		
	☐ Check this box if you h	ave attached a sh	ı neet listing	additional ch	ildren who rec	eive
A. Costs	r Health Insurance, I for Petitioner If you are Restitioner has health insurance. True False If you check a, list the frequent of the paid? We will the total the tot	espondent, give your grance availab urance availab uency and cost of (2).	nur best esti le throug health inst eekly (ever	imate for each h employer urance paid. y other week)	amount.	aly
	Type of employer health	insurance		ten paid?* B,M,T	Cost	
	Single health insurance				\$	
	Family health insurance				\$	
(2) Pe a. b.	titioner has health insulation True True False If you check a, list the frequency of the continue to the c	uency and cost of	health inst	ırance paid.		ıly

True False

If you check b, continue to (4).

Type of other health insurance	How often paid?* W,B,M,T	Cost
Single health insurance		\$
Family health insurance		\$

(3) Petitioner pays medical support for the child or children as required by court order.

If you check a, list the frequency and cost of medical support paid.

	Medical support paid to	How often paid?* W,B,M,T	Cost
			\$
			\$
			\$
4) Pe a. b.	titioner has dental insurance availad True False If you check a, list the frequency and cost of the solution of the solutio	of dental insurance paid.	
	$T = Two \ times \ a \ month$ Type of employer dental insurance	How often paid?*	Cost
	Single dental insurance	W,B,M,T	\$
	Family dental insurance		\$
5) Pe a. b.	titioner has dental insurance through True True False If you check a, list the frequency of other defined the continue to (6). *How often paid? $W = Weekly$ $B = Bi-T = Two times a month$	lental insurance paid.	

Type of other dental insurance	How often paid?* W,B,M,T	Cost
Single dental insurance		\$
Family dental insurance		\$

(6)	Pet	titioner pays other	medical expens	es not covered by insu	rance.
	a. 1	True			-
	b. (False			
				of other medical expenses po ion, etc. expenses as one lui	-
		If you check (6)b, con	ntinue to 4B, Costs for	r Respondent.	
		*How often paid? W T = Two times a mon	•	weekly (every other week)	M = Monthly
		How often paid?* W,B,M,T	Cost		
			\$		
			\$		
B. Cos	ts f	for Respondent If	you are Petitioner, giv	– e your best estimate for each	amount.
(1)	Res	spondent has hea l	lth insurance ava	ailable through employe	er.
	a. (T rue			
	b. (False			
		If you check a, list the	frequency and cost of	of health insurance paid.	
		If you check b, contin	nue to (2).		
		*How often paid? W T = Two times a most		weekly (every other week)	M = Monthly

Type of employer health insurance	How often paid?* W,B,M,T	Cost
Single health insurance		\$
Family health insurance		\$

a. True	
b. False	
If you check a, list the frequency and cost of health insurance paid.	
If you check b, continue to (3).	
*How often paid? $W = Weekly$ $B = Bi$ -weekly (every other week) $T = Two$ times a month	M = Monthly

(2) Respondent has health insurance through a source other than employer.

order.

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

Type of other health insurance	How often paid?* W,B,M,T	Cost
Single health insurance		\$
Family health insurance		\$

(3) Respondent pays medical support for the child or children as required by court

Medical support paid to How often paid?* \$ \$ Respondent has dental insurance available through employer. a. True b. False
\$ Respondent has dental insurance available through employer. a. OTrue
Respondent has dental insurance available through employer. a. OTrue
Respondent has dental insurance available through employer. a. OTrue
a. OTrue
Type of employer dental insurance How often paid?* Cost
Type of employer dental insurance W,B,M,T Cost
Single dental insurance W,B,M,T Single dental insurance \mathbb{R}^{N}

Type of other dental insurance	How often paid?* W,B,M,T	Cost
Single dental insurance		\$
Family dental insurance		\$

(6)	Respondent pays other medical expenses not covered by insurance.
(0)	a. True
	b. False
	If you check a, list the cost and frequency of other medical expenses paid that are not covered by insurance. Include all medical, dental, vision, etc. expenses as one lump sum.
	If you check (6)b, continue to 5, Expenses.
	*How often paid? $W = Weekly$ $B = Bi$ -weekly (every other week) $M = Monthly$ $T = Two$ times a month

How often paid?* W,B,M,T	Cost
	\$
	\$

5. Expenses

A. Living arrangements

Check one

- (1) My spouse and I live in the same home.
- (2) My spouse and I do not live in the same home.

B. My expenses

Note: You must complete this section if you or your spouse want spousal support (alimony).

*How often paid?: W= Weekly B= Bi-weekly (every other week) M= Monthly T= Two times a month A= Annually

Type of expense	Paid to	How often paid?* W,B,M,T,A	Monthly payment
(1) House payment or rent			\$
(2) Food At home & restaurants			\$
(3) Transportation (gas, bus fare) Not car loan payments – see (12).			\$
(4) Clothing			\$
(5) Medical, dental Not health insurance payments – see (10).			\$

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

(6) Utilities (gas, electric)	\$
(7) Phone	\$
(8) Cable / satellite television / internet	\$
(9) Car insurance payment	\$
(10) Health insurance payment	*
(11) Credit card payments	\$
(12) Car loan payments	\$
(13) Other loan payments	\$
(14) Other expense Identify:	\$
(15) Other expense Identify:	\$
(16) Other expense Identify:	\$
(17) Totals from attached sheets, if any Check this box if you have attached a sheet with additional information on your expenses.	\$
Total expenses	\$ 0.00

Continued on next page

6. Attorney Help

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

	Name of attorney or org	anization, if an	y Atto	rney 's P.I.N. #	– Ask the attorn	пеу
	Business address of atto	rney or organiz	ation City		State	ZIP code
	() Attorney's phone numbe	(444	:1 - 11
Section This d	ification of Service in 8 to be completed only if document, if filed electronic	filing in paper of ally, will autom	or if the other atically be ser	party is exempt ved on register	ed parties.	
Prin	nt your name		_, certify tha	Month	Day	, 20 <u> </u>
attorr Name	led or gave a copy of they at this address: of person to whom I delive 's or attorney's mailing add	red or mailed it		the other par	$\frac{1}{State}$	er party's - ZIP code
$\frac{\text{Attorr}}{Name}$ $\frac{1}{Party}$	ney at this address: of person to whom I delive	red or mailed it	.	the other par		
Name Party Oath	ney at this address: of person to whom I delive 's or attorney's mailing add n and Signature	red or mailed it dress	- City		State	- ZIP code
$\frac{\text{Name}}{\text{Party}}$ $\frac{\text{Oath}}{\text{I}, \frac{\text{Prin}}{\text{Prin}}}$	of person to whom I delive 's or attorney's mailing add n and Signature nt your name of the State of lowa tha ded in this Financial Aff	red or mailed it dress t I have read idavit is true a	- City , certify und this Financia	er penalty of	State perjury and p	$-rac{ZIP\ code}{}$ ursuant to t
Name Party Oath I, Print laws o	of person to whom I deliven's or attorney's mailing addinard and Signature of the State of lowa that	red or mailed it dress t I have read	- City , certify und this Financia	er penalty of	State perjury and p	$-rac{ZIP\ code}{}$ ursuant to t
Name Party Oath I, Print laws provid	of person to whom I delive 's or attorney's mailing add n and Signature nt your name of the State of lowa tha ded in this Financial Aff	red or mailed it dress t I have read idavit is true a	- City , certify und this Financia	er penalty of	State perjury and p	$-rac{ZIP\ code}{}$ ursuant to t

Rule 17.200—Form 225: Affidavit of Mailing Notice

Petitioner: You **must** file this Affidavit if you served Notice by Publication in a newspaper and you ask the court for a divorce Decree by default. Petitioner **must** also complete the oath and signature section on the next page.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for	County where your case is filed			
Upon the Petition of	Equity case no			
Petitioner Full name: first, middle, last	7 maavit or maining House			
and concerning				
Respondent Full name: first, middle, last				
Attorney Help	e or fill in this paper.			
B. An attorney helped me prepare or find the following street of the street in the following street in	• •			
Name of attorney or organization, if any	Attorney's P.I.N. # – Ask the attorney			
Business address of attorney or organization	on City State ZIP code			
()('s fax number – optional Attorney's email address – o			

Petitioner's Oath and Signature on next page

Rule 17.200—Form 225: Affidavit of Mailing Notice, continued

l,		_ , certify under pe	nalty of perju	ary and p	oursuant to
Print your name					
laws of the State of Iowa		day of Day Month	, 20	, I se	ent by ordin
mail with proper postage	, the following	g paper or papers:			
Check one					
Original Notice and	Petition for Dis	ssolution of Marriage,	or		
\simeq					
		I' I' C D - C II			
Notice of Intent to F	ile a Written A	pplication for Default	Decree		
•		•	Decree		
•		•	Decree		
Notice of Intent to F to Respondent's last-kno Respondent's street address		•	Decree	State	ZIP code
to Respondent's last-kno		as follows:	Decree	State	ZIP code
to Respondent's last-kno		as follows:	Decree	State	ZIP code
to Respondent's last-kno		as follows:	Decree	State	ZIP code
to Respondent's last-kno	own address a	as follows: City		State	ZIP code
to Respondent's last-kno	own address a	as follows: City		State	ZIP code
to Respondent's last-known Respondent's street address Signed on: Month Da	own address a	City Petitioner's sign			
to Respondent's last-kno	own address a	as follows: City		State State	ZIP code
to Respondent's last-known Respondent's street address Signed on: Month Da	own address a	City Petitioner's sign			

 $scan \ the \ form \ after \ signing \ it \ and \ then \ file \ electronically.$

Rule 17.200—Form 226: Notice of Intent to File Written Application for Default Decree

Petitioner: If Respondent has not filed an Answer or Motion within 20 days from the date of Service of the Original Notice or date of the Acceptance of Service, you may seek a Default Decree.

Before Petitioner asks the court for a Default Decree of Dissolution of Marriage, Petitioner must file this form (226).

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District C	ourt for	unty where your c		Coi	unty
	Con	unty where your c	ase is filed		
Upon the Petition of		Equity case n	o		
Petitioner Full name: first, middle, last	(of Intent to tion for De		
and concerning					
Respondent Full name: first, middle	e, last				
To: Respondent's first name	26.14				
Respondent's first name	Middle name	Last na	me		
Date of Notice:	, 2	0			
	Day nportant Notice				
Handwritten signature of Petitioner or	ou should seek leg	/s/		ioner or	Attorney
if filing in paper		if filing electi	ronically		
The person who provided the signa	ture above must fil	l in the informati	on below.		
Present street address (If attorney,	, firm address)	City		State	ZIP code
()	Email addre				
	Email addre	P.S.S			
Instructions for Petitioner					
Filing your Notice electron	•				
EDMS will automatically serve Re		,	·	·	
Filing your Notice in pape	•	-	om the court to	file in pa	per)
 Deliver a copy of this form to F Complete form 225 and file the File the original of this form (2: Keep a copy for your records. 	e original at the clerk of 26) at the clerk of court	court's office.			
December 2013	Rule 17.20	00—Form 226			Page 1 of 1

Rule 17.200—Form 227: Request for Relief in a Dissolution of Marriage with Children

Use this form only if you have filed a Petition for Dissolution of Marriage (201) and:

- · Your spouse (Respondent) did not file an Answer, or
- Your spouse will not work with you to prepare a Settlement Agreement (228).

Caution: This form may require you to provide protected or sensitive information.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (211) if you have not already done so.
- ffiling in paper, you may use form 211 to provide any protected information in full if you have not already done so.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for	County where your cas	se is filed	County
Upon the Petition of	Equity case no)	
Petitioner Full name: first, middle, last		r Relief in a riage with (Dissolution Children
and concerning			
Respondent Full name: first, middle, last	_		
and you fear for your safety, you may leave your	address, phone number, ar	nd email blank.	
I am Check A or B and fill in C and D. A. Petitioner B. Respondent C. Petitioner's birth year and present res	sidence: Birth year		
Check A or B and fill in C and D. A. Petitioner B. Respondent		State	ZIP code
Check A or B and fill in C and D. A. Petitioner B. Respondent C. Petitioner's birth year and present res	Birth year	State Email a	
Check A or B and fill in C and D. A. Petitioner B. Respondent C. Petitioner's birth year and present research present street address	Birth year City Phone number	Email a	
Check A or B and fill in C and D. A. Petitioner B. Respondent C. Petitioner's birth year and present reserving present street address County	Birth year City Phone number residence:	Email a	

2. Request for Relief

Rule 17.200—Form 227: Request for Relief in a Dissolution of Marriage with Children, continued

Α.	Childre	en Check all that are true			
	(1)	Petitioner and Respondent agree to the Plan (229). A parenting plan must be pro-			
	(2)	Petitioner and Respondent do not a I filed a Proposed Parenting Plan (2 Request for Relief.			o the court with the
	(3)	Petitioner has taken the children in	the middle course. Attach	certificate	
	(4)	Respondent has taken the children	in the middle course. Atta	ch certifica	ite
В.	Break	down of marriage			
	The ma	arriage is broken down and cannot be	e saved.		
C.	Couns	seling			
	Counse	eling will not save the marriage.			
D.	Waitin	g period before decree Check one			
	(1) 🔿	More than 90 days have passed sin an Original Notice.	ce Respondent accepted	service or	was served with
	(2)	Fewer than 90 days have passed si an Original Notice, but I want the co hearing because:	The second secon		
E.	Financ (1) (2) (2)	This paper explains how I would like ial affidavits Check one I filed a Financial Affidavit (224). I didentity and value of all assets and I am asking that the court not require	pertify that I have fully disc	losed all ir	
F.	The amo	support Check all that are true ount of child support is determined using			
	of Humo	an Services provides a child support esti	mator on its website. Go to:	https://chilo	lsupport.ia.gov/.
	(1)	Petitioner shall pay child support to R	espondent in the amount of	f\$	per month.
	(2)	Petitioner shall pay child support to a	third party in the amount of	\$	per month.
		Third party's full name: first, middle, last	t		
		Present street address	City	State	ZIP code
		County			

Rule 17.200—	Form 227: Request for F	Relief in a Dissolu	tion of Marriage	with Children, continued	l		
(3)	☐ Respondent sha	all pay child sup	port to Petition	er in the amount of \$		pe	r month.
(4)	☐ Respondent sha	all pay child sup	pport to a third p	party in the amount of	f\$	pe	r month.
	Third party's full	name: first, mida	lle, last				
	Present street ad	dress	City	<u> </u>	State	ZIP code	
	County						
(5)	Child support paym	ents shall begi	n on the	day of		, 2	20
	for the following chi	ldren:		Month			Year
	First, middle, 8 initials of each		Birth year	First, middle, 8 initials of each		Birt	h year
	a.			d.			
	b.			e.			
	c.			f.			
	☐ Check this b	ox if you are att	aching a separa	ate sheet listing addition	nal childr	en.	
G. Tay	a. Amount rec	quested:\$	per mo	amount you want and onth ne Guidelines amour	-		
	l ask the court to se	et the tax deduc	ction as follow	s:	Check or	ne for eac	h child
	First, middle, & last initials of each child	Birth year	Parent who s	should now claim deduction	Every Year	Even Years	Odd Years
	a.				0	0	0
	b.				0	0	0
	C.				0	O	O
	d.				O	O	O
	e.				Ō	Ŏ	Ō
	f.				Ō	Ō	Ŏ
'	☐ Check this box if	you are attachii	ng a separate sł	neet listing additional	children.	-	

Rule 17.2	7.200—Form 227: Request for Relief in a Dissolution	of Marriage with Children, continued	
	(2) The deduction will start in tax year ${Yea}$		
	Note: The parent with custody must sign IRS I Tax forms are available from the IRS website: <u>I</u> The earned income tax credit is not the same a		e the deduction.
Н.	l. Health care expenses		
	I ask the court to set the health care e	xpenses as follows: Check all that appli	ły
	Petitioner Respondent		
		support (health insurance) of uncovered	d was die al
	expenses for the child medical expenses sh	dren. After that amount is spent, then un	covered
	% by Pet	itioner and% by Responder	nt.
	(3) Shall pay cash medica	al support in the amount of \$	per month.
1.	Division of Personal Property Check on	ne	
	Petitioner will keep the personal p	ned during the marriage has been divided property in Petitioner's possession, and R spondent's possession. If you check (1) , sk	espondent will
	(2) Our personal property has not been as follows:	en divided. I ask that our personal prope	rty be divided
		Petitioner's separate personal property:	
	b. Respondent will get the following	as Respondent's separate personal prop	perty:
	☐ Check this box if you attached a sep	arate sheet listing additional information about p	personal property.
	person's retirement account or pension, a	ons: If the divorce Decree gives you or your spous separate order called a Qualified Domestic Relatio d; you should ask an attorney for help with a QDRC	ons Order (QDRO)
J.	. Division of real estate		
	For each parcel of real estate you own, provid Attach a separate sheet for each additional pa		
	(1) Ownership of real estate Check one		
	a. O We do not own any real estat	e. If you check a, skip to K.	

January 2014

	b. () We own real estate loo	cated at:	
		in the Other of	Street address	
		in the City of	, County of	, and
		State of	This land is described in the deed or	contract as follows
(2)) The re	eal estate shall be:		
	Check			
	a. (Sold and the profit or c to Respondent.	lebt divided% to Petitioner and	%
	b. C	Awarded to Petitioner,	subject to all liens and mortgages.	
	o. C	'	nt, subject to all liens and mortgages.	
	d. C	Other Explain		
(3)) Additi	onal real estate		
(-)			ching separate sheets for additional parcels of	real estate.
			icated and important step in the divorce process.	, , , , , , , , , , , , , , , , , , , ,
			te, you should talk to an attorney.	
K. Di	vision o	of debts		
Ch	neck one			
(1)) Th	nere are no debts.		
(2)) 🖰 Ih	ave listed all the debts I	know about and ask that they be divided a	s follows:
,		tach additional sheets if ne		
	a. Pe	etitioner will pay the follow	wing debts:	
	i.	Business or person to value debt is owed	whom ii. Account number, if any Last 4 numbers only	iii. Total amoun still owed
	(6	a)		\$
	(i	b)		\$
	(0	c)		\$
	(0	d)		\$
	<u> </u>			

Rule 17.200-Form 227: Request for Relief in a Dissolution of Marriage with Children, continued

b. Respondent will pay the following debts:

i. Business or person to whom a debt is owed	ii. Account number, if any Last 4 numbers only	iii. Total amount still owed
(a)		\$
(b)		\$
(c)		\$
(d)		\$
(e)		\$

☐ Check this box if you are attaching a separate sheet listing additional information about Respondent's debts. c. For any debt we do not know about, the spouse who made the debt will pay that debt. You may want to close any credit cards and joint bank accounts in the names of both spouses. Closing accounts may limit the funds a former spouse has access to and may limit your liability for your former spouse's debts. Cash payment I ask that Check one Neither Petitioner nor Respondent pay any money to the other. Petitioner pay Respondent \$ ______ to equalize the division of property and debts by \overline{Day} , 20 \overline{Year} ____to equalize the division of property Respondent pay Petitioner \$ ____ and debts by Month M. Spousal support (alimony) Check one I ask that (1) Neither Petitioner nor Respondent pay spousal support (alimony) to the other. Spousal support (alimony) be paid as follows: _____ N. Name change Check one I ask that my last name (1) () Not be changed. Be changed to: Name can only be changed to Print your former or birth name name on birth certificate or name used immediately prior to the marriage.

3.

Rule 17.200—Form 227: Request for Relief in a Dissolution of Marriage with Children, continued

Ο.	Court fees
	Check one
	I ask that
	(1) Petitioner will pay all court fees.
	(2) Respondent will pay all court fees.
	(3) Petitioner and Respondent shall each pay one-half of the remaining court fees.
	(4) Petitioner and Respondent shall each pay one-half of the total court fees.
P.	Attorney's fees
	Check one
	(1) I have no attorney's fees.
	(2) I will pay my own attorney's fees.
	(3) Task that my spouse pay me \$ for attorney's fees.
Q.	Necessary documents
	I ask that the court require each of us to sign and deliver to each other any papers that may be needed to carry out the terms of the Decree.
R.	Other request for relief
	☐ Check this box if you have attached a separate sheet listing additional requests for relief.
Sta	atements of Understanding and Fact
Che	ck all that apply
A.	☐ I have made a full disclosure of my property and debts to the court.
B.	☐ This request for relief addresses all issues in my divorce.
C.	☐ I want the court to approve this request for relief and make it part of the final Decree.

Continued on next page

 $Rule\ 17.200 — Form\ 227: \textit{Request for Relief in a Dissolution of Marriage with Children}, continued$

4.	Attor	ney Help						
	Check o	one						
	A. C) An attorney d	lid not help	me prepare o	r fill in this pape	r.		
	В. С) An attorney h	elped me p	repare or fill in	n this paper.			
	_	If you check B, y	vou must fill ir	n the following in	formation:			
		Name of attorne	y or organiza	tion, if any	Attorney's P.I.N	v's P.I.N. # – Ask the attorney		
		Business addres	s of attorney o	or organization	City		 ZIP code	
					•			
		Attorney's phon	e number	_ () Attorney's fa	 x number – optional	Attorney's em	ail address – optional	
	This do	cument, if filed el	ectronically w	ill automatically	e other party is exe be served on regis ify that on		c filing. , 20	
	Print	your name			Mont	h \overline{Da}	y Year	
6.		or attorney's man		City	,	State	ZIP code	
	I,	your name		, hav	e read this Req	uest, and I certi	ify under penalty	
		-	ant to the la	ws of the Stat	e of lowa that th	ne information I	have provided	
		Request is tru					·	
	Signad	on: Month	$-{Day}$	_, 20	Your signature	*		
	Signea	on. Monin	Duy	rear	10ur signature			
	Mailing	g address			lity	State	ZIP code	
	()						
	Phone i	number	Emai	l address	Ac	dditional email add	łress, if applicable	
		ner filing electronic The form after signin			ite your signature on	this form. If you are	e filing electronically,	
Dec	ember 20	13		Rule 17.20	0—Form 227		Page 8 of 8	

Rule 17.200—Form 228 Settlement Agreement for a Dissolution of Marriage with Children

Use this form only if you and your spouse both agree to the terms of a Settlement Agreement.

Do not use this form if:

- You and your spouse have no children under the age of 18.
- You and your spouse have no children 18 years of age or older who still need support.
- There are no children under age 18 who were adopted or born during this marriage.

Caution: This form may require you to provide protected or sensitive information.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (211) if you have not already done so.
- If filing in paper, you may use form 211 to provide any protected information in full.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

	In the Iowa District Court fo	County where your c	case is filed	County
Upoi	n the Petition of	Equity case n	10	
Petit	ioner Full name: first, middle, last		ement Agreen n of Marriage	nent for a with Childre
and c	concerning			
Resp				
anc	ersonal Information Fill in all in dyou fear for your safety, you may leave	your address, phone number		ulted by your spou:
anc	ersonal Information Fill in all in	your address, phone number		ulted by your spou:ZIP code
anc	ersonal Information Fill in all in d you fear for your safety, you may leave Petitioner's birth year and prese	your address, phone number nt residence: Birth year	r, and email blank.	ZIP code
A.	ersonal Information Fill in all in dyou fear for your safety, you may leave Petitioner's birth year and prese Petitioner's present street address	your address, phone number nt residence: Birth year City Phone number	s, and email blank. State Email a	ZIP code
A.	Personal Information Fill in all in a	your address, phone number nt residence: Birth year City Phone number sent residence:	s, and email blank. State Email a	ZIP code

2. Agreements

We agree to the following:

A. Children Check all that are true

Rule 17.200—Form 228: Settlement Agreement for a Dissolution of Marriage with Children, continued

	(1) We agree to the custody and visitation set out in the Agreed Parenting Plan (229).
	(2) We do not agree about custody and visitation. We each filed a Proposed Parenting Plan (230). A parenting plan, either form 229 or form 230, must be provided to the court with the Settlement Agreement.
	(3) Petitioner has taken the children in the middle course. Attach certificate.
	(4) Respondent has taken the children in the middle course. Attach certificate.
B.	Breakdown of marriage The marriage is broken down and cannot be saved.
C.	Counseling will not save the marriage.
D.	Waiting period before decree Check all that apply
	(1) More than 90 days have passed since Respondent accepted service or was served with an Original Notice.
	(2) Fewer than 90 days have passed since Respondent accepted service or was served with an Original Notice, but we want the court to take action right away without a separate hearing because:
F	This paper explains how we would like to settle all issues in our divorce. Financial affidavits. Check one
E.	Financial affidavits Check one
E.	
E.	Financial affidavits Check one (1) Petitioner or Respondent has filed a Financial Affidavit (224). If you check (1), check each that is applicable. a. Petitioner has filed a Financial Affidavit. Petitioner certifies that Petitioner
E.	Financial affidavits Check one (1) Petitioner or Respondent has filed a Financial Affidavit (224). If you check (1), check each that is applicable. a. Petitioner has filed a Financial Affidavit. Petitioner certifies that Petitioner has fully disclosed all income and the identity and value of all assets and debts.
E.	Financial affidavits Check one (1) Petitioner or Respondent has filed a Financial Affidavit (224). If you check (1), check each that is applicable. a. Petitioner has filed a Financial Affidavit. Petitioner certifies that Petitioner has fully disclosed all income and the identity and value of all assets and debts. b. Respondent has filed a Financial Affidavit. Respondent certifies that Respondent
E.	Financial affidavits Check one (1) Petitioner or Respondent has filed a Financial Affidavit (224). If you check (1), check each that is applicable. a. Petitioner has filed a Financial Affidavit. Petitioner certifies that Petitioner has fully disclosed all income and the identity and value of all assets and debts.
E.	Financial affidavits Check one (1) Petitioner or Respondent has filed a Financial Affidavit (224). If you check (1), check each that is applicable. a. Petitioner has filed a Financial Affidavit. Petitioner certifies that Petitioner has fully disclosed all income and the identity and value of all assets and debts. b. Respondent has filed a Financial Affidavit. Respondent certifies that Respondent has fully disclosed all income and the identity and value of all assets and debts.
E.	Financial affidavits Check one (1) Petitioner or Respondent has filed a Financial Affidavit (224). If you check (1), check each that is applicable. a. Petitioner has filed a Financial Affidavit. Petitioner certifies that Petitioner has fully disclosed all income and the identity and value of all assets and debts. b. Respondent has filed a Financial Affidavit. Respondent certifies that Respondent has fully disclosed all income and the identity and value of all assets and debts.
E.	Financial affidavits Check one (1) Petitioner or Respondent has filed a Financial Affidavit (224). If you check (1), check each that is applicable. a. Petitioner has filed a Financial Affidavit. Petitioner certifies that Petitioner has fully disclosed all income and the identity and value of all assets and debts. b. Respondent has filed a Financial Affidavit. Respondent certifies that Respondent has fully disclosed all income and the identity and value of all assets and debts. (2) We are asking that the court not require us to file Financial Affidavits because: Child Support Check all that are true Note: The amount of child support is determined using the lowa Child Support Guidelines. The lowa Department of

 $\textbf{Rule 17.200} \\ \textbf{—Form 228: } \textit{Settlement Agreement for a Dissolution of Marriage with Children}, \textbf{continued}$

		Third party's full nam	ne: first, middle,	last				
		Present street addre	SS	- City	,	State	ZIP code	?
		County		_				
	(3)	☐ Respondent shall p	ay child suppo	ort to Petitione	r in the amount of	\$	pe	r month.
	(4)	☐ Respondent shall p						
		Third party's full nan	ne: first, middle,	last				
		Present street addre	SS	City	,	State	ZIP code	?
		County						
	(5)	Child support payment	ts shall begin	on the	day of			20
		for the following childre			Month			Year
		First, middle, & last initials of each child	Birth	year	First, middle, & initials of each		Birt	h year
		a.			d.			
		b.			e.			
		c.			f.			
		Check this box if you	u are attaching	a separate she	et listing additiona	ıl children.	•	
	(6)	☐ Check here if you Guidelines amoun						
		a. Amount reque			•	na expressi	wily in o.	
		·	-		Guidelines amo	unt becau	se:	
G.	Tax	exemption						
	(1)	I ask the court to set the	ne tax deduction	on as:		Check o	one for eac	h child
		First, middle, & last initials of each child	Birth year	Parent who s	should now claim deduction	Every Year	Even Years	Odd Years
		a.				0	0	0
		b.				0	0	0
		c.				\overline{O}		0

 $Rule\ 17.200 — Form\ 228:\ \textit{Settlement Agreement for a Dissolution of Marriage with Children}, continued$

		d.								0	0	0
		e.								0	0	\overline{O}
		f.				-2				Ô	Ô	Ō
			Check this b	ox if you	u are attaching	a separ	rate sheet	listing add	ditional c	children.		
	9	Tax The	forms are avail earned income	able fron tax cred	ody must sign IR n the IRS website dit is not the sam	e: <u>http://w</u> e as the t	ww.irs.gov ax exempti	<u>.</u>	stodial pa	rent can ta	ke the ded	uction.
	(2)	The	e deduction v	will star	t in tax year _ I	ear						
Н.			care exper		health care	expen	ises as f	follows:	Check a	ll that app	ply	
	Petit	ione	er Responde	ent								
	(1) (\bigcup	O	- 1	ovide medica	10.0	0.50		50			
	(2) (O	0	the ch	ay the first \$_ hildren. After be paid							
					% by F	etitione	er and		_% by R	esponde	nt.	
	(3)	\supset	0	shall p	oay cash med	lical sup	port in th	he amour	nt of \$		per	month.
I.	Divi Chec		n of person	al pro	perty							
	(1) (_	Petitioner's possession	posses	our personal p ssion. Respo							
	(O) 1	$\overline{}$	If you check	-		r						
	(2)				erty has not b neets if necessa		naea, bu	it we agre	e it wiii i	be divide	d as lollo	ows.
	0	a.	Petitioner w	/ill get t	the following a	as Petit	ioner's s	eparate p	ersonal	property	:	
		b.	Responden	it will ge	et the followir	ig as Re	espondei	nt's separ	rate pers	sonal pro	perty:	
			person's retire	ment ac	counts and per count or pension ROs are complica	, a separa	ate order ca	alled a Qual	lified Dom	estic Relati	ions Order	

 $Rule\ 17.200 — Form\ 228:\ \textit{Settlement Agreement for a Dissolution of Marriage with Children}, continued$

J.			n of real esta parcel of real	i e Estate you own, provide the f	ollowing information.			
		Attach a separate sheet for each additional parcel.						
	(1)		nership of real	estate				
		Che	ck one					
		a.	_	t own any real estate. If y				
		b. (We own r	eal estate located at:	et address			
					, County of			
			State of _ follows:	Thi	s land is described in the dee	d or contract as		
	(2)		real estate sh					
		a. (Sold and to Respor		% to Petitioner and	%		
		b.	Awarded	to Petitioner, subject to all	liens and mortgages.			
		C. (Awarded	to Respondent, subject to	all liens and mortgages.			
		d. (Other E	cplain				
	(3)	Add	itional real est	ate				
			Check this box	if you are attaching separate	sheets for additional parcels of	real estate.		
				o real estate is a complicated an title to real estate, you should ta	d important step in the divorce proce lk to an attorney.	SS.		
⟨ .	Div	/isioı	n of debts					
	Check all that apply							
	(1) There are no debts.							
	(2)	\sim		d all the debts that we kno al sheets if necessary.	w about and ask that they be	divided as follows:		
		a.	Petitioner will	pay the following debts:				
			i. Business a debt is o	or person to whom wed	ii. Account number, if any Last 4 numbers only	iii. Total amount still owed		
	(a) \$							

(b)

\$

Rule 17.200—Form 228: Settlement Agreement for a Dissolution of Marriage with Children, continued

(c)	\$
(d)	\$
(e)	\$

- ☐ Check this box if you are attaching a separate sheet listing additional information about Petitioner's debts.
- b. Respondent will pay the following debts:

Business or person to whom a debt is owed	ii. Account number, if any Last 4 numbers only	iii. Total amount still owed
(a)		\$
(b)		\$
(c)		\$
(d)		\$
(e)		\$

- ☐ Check this box if you are attaching a separate sheet listing additional information about Respondent's debts.
- c. For any debt we do not know about, the spouse who made the debt will pay that debt.

Note: You may want to close any credit cards and joint bank accounts in the names of both spouses. Closing accounts may limit the funds a former spouse has access to and may limit your liability for your former spouse's debts.

L. Cash payment

We ask that Check one

(1)	1	Neither Petitioner	nor Respondent r	pav anv mone	to the other.

(2) Petitioner pay Respondent \$ and debts by		to equalize the division of property
Month	Day	, 20 <u>Year</u>
(3) Respondent pay Petitioner \$		to equalize the division of property

(3) Respond	dent pay Petitioner \$ ts by		to equ	alize the division of property
and deb	Month	Day	, 20 <u></u> .	

Continued on next page

Rule 17.200 - Form 228: Settlement Agreement for a Dissolution of Marriage with Children, continued

M.	•	Spousal support (alimony) Check one							
		sk that:							
	(1)								
	(2)	Petitioner pay spousal support (alimony) to							
	(2)	T emoner pay spousar support (ammony) to	respondent de follows.						
	(3)	Respondent pay spousal support (alimony)	to Petitioner as follows:						
	()								
N.	Name	change							
	Check	_							
	We as	sk that							
	(1) Pe	etitioner's name							
	a.	Not be changed.							
	b.	Be changed to:	Name can only be changed to						
			name on birth certificate or name used immediately prior to the marriage.						
		Print Petitioner's former or birth name	innediately prior to the marriage.						
	(2) Re	espondent's name							
	a.	Not be changed.							
	b.	Be changed to:	Name can only be changed to						
			name on birth certificate or name used immediately prior to the marriage.						
		Print Respondent's former or birth name	inmediatety prior to the marriage.						
Ο.	Court	fees							
	Check	one							
	We as	sk that							
	(1)	Petitioner will pay all court fees.							
	(2)	Respondent will pay all court fees.							
	(3)	Petitioner and Respondent shall each pay o	one-half of the remaining court fees.						
	(4)	Petitioner and Respondent shall each pay of	one-half of the total court fees.						
P.	Attorn	ney's fees							
		etitioner's attorney's fees							
	Ch	neck one							
	a.	Petitioner has no attorney's fees.							
	b.	Petitioner will pay Petitioner's attorney's	s fees.						
	C.	Respondent will pay \$	for Petitioner's attorney's fees.						

Rule 17.200—Form 228: Settlement Agreement for a Dissolution of Marriage with Children, continued

Attach additional sheets if necessary.

	(2)	Respondent's attorney's fees	
		Check one	
		a. Respondent has no attorney's fees.	
		b. Respondent will pay Respondent's attorney's fee	S.
		c. O Petitioner will pay \$	for Respondent's attorney's fees.
Q.	Nec	cessary documents	
		e will sign and promptly deliver to each other any papers that ttlement Agreement.	at may be needed to carry out this
R.	Oth	her agreements	

Continued on next page

Rule 17.200—Form 228: Settlement Agreement for a Dissolution of Marriage with Children, continued

3.		torney	Help											
		Petitio	ner											
		(1)	An attorne	y did not help	o me prepare d	or fill in this paper.								
		(2)			prepare or fill i									
		` ' '				ving information:								
		Nai	me of attorne	y or organiza	tion, if any	Attorney's P.I.N	I. # − Ask t	he attori	ney					
		\overline{Bu}	siness addres	s of attorney o	or organization	City		State	ZIP code					
		(_)		_ ()		_							
	_		orney's phon	e number	Attorney's fo	ax number – optional	Attorn	ey 's ema	iil address – optional					
	В.	Respondent (1) An atternay did not halp me prepare or fill in this paper.												
		(1) An attorney did not help me prepare or fill in this paper.												
		(2) An attorney helped me prepare or fill in this paper. If you check (2), you must fill in the following information:												
			1) you check	(2), you mus	i jiii iii iiie joilor	ving injormation.								
		Na	me of attorne	y or organiza	tion, if any	Attorney's P.I.N	J. # -Ask t	he attori	ney					
		\overline{Bu}	siness addres	s of attorney o	or organization	- City		State	ZIP code					
		()		()	•								
		Att	orney 's phon	e number	Attorney's fo	ax number – optional	Attorn	ey 's ema	nil address – optional					
1	Oa	ithe ar	nd Signati	Irec										
٠.	Oaths and Signatures This Settlement Agreement addresses all issues in our divorce. We have made a full disclosure of													
	our property and debts to each other. We want the court to approve this Agreement and make it a													
	part of the final Decree.													
	Α.	Petition	ner's Oath a	nd Signature	;									
		l,			, certi	fy under penalty of p	perjury and	pursuar	nt to the					
			your name	owa that I hav	e read this Settle	ement Agreement a	nd it accura	tely stat	es how I would					
						I know I have the rig		-						
		_			g this Agreemer and filing with the	nt. I am asking that	this Settlen	nent Agr	eement be					
		present	ed to a judge	ioi appiovai a		court.								
		Month		Day		Petitioner's sign	nature*							
		Mailing	address		Cit	y		State	ZIP code					
		()											
		Phone r	umber		Email address		Additional	email ac	ddress – if available					
						ındwrite your signatuı	re on this for	m. If you	ı are filing					
		electr	onically, scan	the form after s		file electronically.								
					Continue	d on next page								

 ${\it Rule~17.200--Form~228:~Settlement~Agreement~for~a~Dissolution~of~Marriage~with~Children,} continued$

Respondent's Oat	n and Signat	ure					
l, Print your name		, ce	ertify under penalty o	of perjury an	ıd pursuar	nt to the	
laws of the State of like the court to add Agreement. I am vo presented to a judge	ress the issues oluntarily signir	s in my divorce ng this Agreem	e. I know I have the ent. I am asking the	right to talk	to an atto	rney about this	
		, 20					
Month	Day	, 20 <u></u> Year	Respondent's	signature*			
Mailing address			City		State	ZIP code	-
() Phone number		Email address		Additiona	ıl email ac	ddress – if available	_
* Whether filing elect		1	handwrite your signa		form. If you	u are filing	

Rule 17.200—Form 229: Agreed Parenting Plan

 $Use \ this \ form \ if \ both \ spouses \ agree \ to \ everything \ in \ the \ plan \ regarding \ child \ custody \ and \ visitation.$

Do not use this form if you and your spouse **do not** agree to all child custody and visitation arrangements. Instead, use form 230 to present a Proposed Parenting Plan to the court for the child custody and visitation arrangements you want.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

ı	n the Iowa District C		ounty who	there you are filing this Parenting Plan				
Upon	the Petition of			Equ	ity case no			
Petiti	Oner Full name: first, middle, i	last			Agreed Parenting	Plan		
and co	oncerning							
Resp	ondent Full name: first, mi	ddle, last						
	formation for the Co The parties agree to the	nis plan.	donto dhe	. Datiit	on an and Door on don't			
Б.	Children List all children First, middle, & last	Present	Gend	ler	oner ana Responaent. School	Grade		
	initials of each child	age	M	<u>F</u>				
	(1)	1	$\frac{1}{2}$	$\frac{\circ}{\circ}$				
	(2)		0	$\overline{\bigcirc}$				
	(3)		0	\bigcirc				
	(4)		0	\circ				
	(5)		0	\overline{O}				
	(6)		0	\overline{O}				
	☐ Check this box if you a	are attaching	a sheet lis	ting a	dditional children.			
C.	Information about the Check all that are true	children						
	(1) The children lists	ed in B are tl	he only c	hildre	n born to or adopted by these	parents.		
					court case. If you check (2), at ld custody and visitation.	tach a copy of the		

Continued on next page

Rule 17.200-Form 229: Agreed Parenting Plan, continued

- (3) There are children of Petitioner or Respondent not listed in B. Explain
 - If there are children born before the marriage, who are not the children of Petitioner or of Respondent, check (3) and explain.
 - If there are children of Petitioner and Respondent, but the parental rights have been terminated, check (3) and explain.

2. Plan

- A. Read these definitions of legal custody and physical care:
 - (1) Legal custody means a parent has legal rights and responsibilities for the child. These include making decisions about medical care, education, extracurricular activities, and religious instruction.

	religious instruction.
	(2) Joint legal custody means both parents have equal legal rights and responsibilities for the child. These include making decisions about medical care, education, extracurricular activities, and religious instruction.
	(3) Physical care means providing the main home for the child and taking care of the child.
	(4) Joint physical care means both parents have equal rights and responsibilities for providing the main home for the child and taking care of the child.
B.	Legal custody should be
	Check one
	(1) O Joint legal custody to both parents
	(2) To Petitioner
	(3) O To Respondent
	(4) O To other person
	Full name of other person: first, middle, last
C.	Physical care should be
	Check one
	(1) \bigcirc To Petitioner If you check (1), use D for Respondent's visitation.
	(2) To Respondent If you check (2), use D for Petitioner's visitation.
	(3) Joint physical care to both parents If you check (3), use D(12) to explain the joint physical care schedule.
	(4) O To other person
	Full name of other person: first, middle, last
D.	Visitation
	Use D only if one parent will have physical care. This is the schedule for the other parent to see the children.
	(1) Visitation for
	Check one
	a. O Petitioner
	b. Respondent
	🔾

Rule 17.200-Form 229: Agreed Parenting Plan, continued

		ation permiss <i>k</i> a, b, <i>or</i> c.	ion										
	a. (_	should not be	e allowed b	ecau	ıse:							
	b. (Visitation s	should be su	pervised b	ecau	se:							
		The super	visor for visit	ation shou	ld be	Superviso	r's fi	ıll nan	ne: fir:	st, midd	le, last		
	c. (Regular u	ınsupervise apply	ed visitatio	n sc	hedule as	s the	pare	nts ag	ree:			
	i. ii	Reaso	onable visita eek visitatio Tu W		days		(Sa.r			_8ª	ı.m. .m.	
	i	From	weekend Day of week	a	nt	ne (З а.і р.і	m. to	Day of	`week	at <i>Ti</i> i	me	О а.т. Ор.т.
	ir	v. O Every From	other week	end a	nt]] a.ເ] p.ເ	m. m. to į			at		☐ a.m. ☐ p.m.
	٧		Day of week Describe		1 in	ne		1	Day of	week	111	me	
	٧	i. Visitation v		1onth				\overline{Da}	iy ,	20 <u>Year</u>	_		
(3)	Deta	iled holiday	schedule										
	Note:	chedule tells on You do not hav who already ha	ve to fill in eve	rything. Any	day t			neans t	he child	ren will	spend th		
							Τ,		Petiti			espon	
	Holi	day			Tim	-		Every P	R	P	years R	P	l years R
	Nev	/Year's Eve		:		O a.m.	(<u>Q</u>	<u>Q</u>	0	0	\Box	\circ
	Nev	/ Year's Day		:		O a.m.	(\bigcirc	\bigcirc	0	\bigcirc		\bigcirc
	Mar	tin Luther King	ı, Jr. Day	:		O a.m. p.m.	(\bigcirc	\bigcirc	0	\bigcirc	C	\bigcirc

Rule 17.200-Form 229: Agreed Parenting Plan, continued

President's Day	:	Q a.m. p.m.	00	00	00
Memorial Day	:	8 a.m. p.m.	00	0	0
Independence Day July 4th	:	a.m. p.m.	00	0	0
Labor Day	:	O a.m. p.m.	00	0	0
Veterans' Day November 11th	••	O a.m. O p.m.	0	0	0
Thanksgiving Day	:	O a.m. p.m.	0	0	0
Christmas Eve	:	O a.m. O p.m.	0	0	0
Christmas Day	:	Q a.m. p.m.	00	0	0
Mother's Day	:	O a.m. p.m.	0	0	0
Father's Day		a.m. p.m.	00	00	0
Petitioner's Birthday	:	a.m. p.m.	00	00	0
Respondent's Birthday	:	O a.m. O p.m.	00	00	0
Halloween October 31st	:	a.m. p.m.	00	00	0
Other: Describe	:	O a.m. p.m.	00	00	00
Other: Describe	:	O a.m. p.m.	00	00	00

(4) Special rules for holidays

-1		. Talloo Tot Holladyo
Cł	neck o	ne
a.	0	If a holiday falls on a Friday or a Monday, the parent with the holiday will have the whole weekend.
b.	0	If a holiday falls on a Monday or a Friday, the alternating weekend schedule in D(2)c.iv. will continue. This means the parent who has the children on the holiday weekend may have the children two weekends in a row.
C.	0	The parents will cooperate and rearrange the alternate weekend schedule so that neither parent will have the children more weekends in a row without contact with the other parent.
d.	\bigcirc	

Continued on next page

Rule 17.200-Form 229: Agreed Parenting Plan, continued

(5) Summer

Check one
a. O Summer school vacation will be divided as Petitioner and Respondent agree.
b. Petitioner and Respondent will each have one-half of the summer school vacation with alternate weekends to the other parent. The children will be returned to the parent with physical care at least one week before school starts.
c. The parent without physical care will have two weeks of uninterrupted summer visitation with the children and the parent with physical care will have two weeks of uninterrupted summer visitation with the children. During the rest of the summer the weekly visitation schedule should be followed.
d. Other Explain
 (6) Winter school holiday Check one a. Winter school holidays will be divided as Petitioner and Respondent agree. b. Petitioner and Respondent will each have one-half of the winter school holiday and alternate the first and second half each year.
c. Other Explain
 (7) Spring school break Check one a. Spring school break will be divided as Petitioner and Respondent agree. b. Spring school break will be alternated every other year between Petitioner and Respondent. c. Petitioner and Respondent will each have one-half of each spring school break. d. Other Explain
(8) The children's birthdays Check one a. Petitioner and Respondent will have contact with the children on their birthdays as the parents may agree.
b. A child's birthday will be spent with the parent who has the child on that day.
c. Each child's birthday will be alternated from year to year between Petitioner and Respondent.
d. Petitioner and Respondent will each have no less than two hours of personal contact with the child on the child's birthday.
e. Other Explain

Rule 17.200—Form 229: Agreed Parenting Plan, continued

(9) Pick up and drop off
Check all that apply
a. O The parents will agree about pick up and drop off for each visit.
b. The parent with visitation will pick up the children at the other parent's residence at the beginning of visitation and the parent with physical care will pick up the children at the end of visitation.
c. Only certain people can help the parents with transportation. If persons other than Petitioner and Respondent will help them provide transportation of the children, only the following persons are permitted to help:
d. \bigcirc Other arrangements for visitation For example, Petitioner and Respondent will meet
at a location between their residences. Explain
(10) The parent without the children may contact the children by Check all that apply
a. Calling the children
Check one
i. At reasonable hours
Q a.m. Q a.m.
Phone number () Phone number where children can be contacted
b. Emailing the children at this address:
Email where children can be contacted
c. Other Explain
(11) Changes to the schedule
Check all that apply
 a. The parties may agree to additional visitation or changes to the schedule.
b. If one parent fails to arrive at the appointed time, then the other parent will wait for at least
minutes before cancelling the visit.
c. No changes allowed except by a court order.
d. Other Explain
Continued on next page

Rule 17.200-Form 229: Agreed Parenting Plan, continued

(12) Joint physical care plan

Use only if both Petitioner and Respondent are given joint physical care.

a. How Petitioner and Respondent will make decisions about the children: For example, decisions on school, medical care, religion, and other decisions parents make for their children. b. How the children's time will be divided between Petitioner and Respondent: You may use sections 3, 4, 5, 6, 7, and 8 for holidays, school breaks, and birthdays. c. How the children's expenses will be paid: For example, expenses such as clothes, activities, and school fees. ___ d. How Petitioner and Respondent will deal with major changes or disagreements about the children (including changes due to the children's age and development): Other issues: (13) Resolving disagreements Check one Before going to court to resolve disagreements, Petitioner and Respondent will Ask the following person to help them resolve disagreements: Relationship to parties Phone number Name ZIP code Present street address City State Go to mediation. Do not check if mediation will not work because of domestic violence or an injunction. Continued on next page

3.

4.

Rule 17.200—Form 229: Agreed Parenting Plan, continued

At Ch	torney Help)				
Α.	Petitioner					
	(1) An a	ttorney did not hel	p me prepare o	r fill in this paper.		
	\simeq	ttorney helped me				
		u check (2), you mus				
	Name of a	attorney or organiza	tion, if any	Attorney's P.I.N.	#-Ask the attorr	ney
	Business	address of attorney	or organization	City	State	ZIP code
	(_)	_ ()	x number – optional	<u> </u>	
_	,	-	Attorney's fa	x number – optional	Attorney's ema	il address – optional
В.	Responden					
	(1) O An a	ttorney did not hel	p me prepare o	r fill in this paper.		
		ttorney helped me u check (2), you mus				
	Name of a	attorney or organiza	tion, if any	Attorney's P.I.N.	#-Ask the attorr	ney
	Business	address of attorney	or organization	City	State	ZIP code
	()				
	Attorney'.	s phone number	Attorney's fa	x number – optional	Attorney's ema	il address – optional
Thi col	urt to approve	enting Plan addres	ting Plan and m	and visitation issue		. We want the
	l,		, certif	y under penalty of pe	erjury and pursuan	t to the
			_	ed Parenting Plan, an		Plan. I ask the
	Month	Day	Year	Petitioner's signa	ture*	
	Mailing addre	255	City	,	State	ZIP code
	() _ Phone number		Email address		dditional email ad	dress – if available
			paper, you must ha gigning it and then j	ndwrite your signature file electronically.		
			Continue	d on next page		

B.

Rule 17.200-Form 229: Agreed Parenting Plan, continued

Respondent's Oath	n and Signa	ature						
I, Print Respondent	's name	,	certify	under penalty of	perjury ar	ıd pursuar	nt to the	
laws of the State of I court to adopt this Ag			Agreed	d Parenting Plan,	and I agre	e with the	Plan. I ask the	
		, 20_ <u></u>	_					
Month	Day	Year		Respondent's s	ignature*			
Mailing address			City			State	ZIP code	_
() Phone number		Email addre	ess.		Additiona	ıl email ad	ddress – if available	_
* Whether filing electrelectronically, scan					are on this f	form. If you	u are filing	

Rule 17.200—Form 230: Proposed Parenting Plan

Use this form if you and your spouse do not agree to all child custody and visitation arrangements

Do not use this form if both spouses agree to everything in this plan. Instead, use form 229 to tell the court what you both want your plan to be.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

li	n the Iowa District C					County					
		C	ounty wh	ere yoı	ı are filing this Parenting Plan						
Jpon	the Petition of			Equ	ity case no						
					Proposed Parentin	g Plan					
etiti	Oner Full name: first, middle, i	last									
nd co	ncerning										
Respo	ondent Full name: first, mi	ddle, last									
am											
heck o	ne										
Α.	Petitioner										
B.	Respondent										
. Inf	formation for the Co	urt									
A.	Children List all children	n born to or a	dopted by	Petiti	oner and Respondent.						
	First, middle, & last initials of each child	Present age	Gend M	ler F	School	Grade					
	(1)		0	$\overline{0}$							
	(2)		0	0							
	(3)		0	0							
	(4)		0	0							
	(5)		0	0							
	(6)		0	0							
	☐ Check this box if you a	re attaching	a separat	e sheet	listing additional children.						
B.	Information about the	children									
	(1) The children listed in A are the only children born to or adopted by these parents.										
	(2) One or more of the children is in a juvenile court case. If you check (2), attach a corder that allows the district court to order child custody and visitation.										
	(3) There are children										
	 If there are change and change are change are change. 	Petitioner or of									
	певропает, ст	icon (5) una e	лриин								

Rule 17.200—Form 230: Proposed Parenting Plan, continued

• If there are children of Petitioner and Respondent, but the parental rights have been terminated, check (3) and explain.

C.	Special concerns about the children										
	Check a	eck all that are true									
	(1)	Breastfeeding infant									
	(2)	Child with a disability									
	(3)	Other Explain									
D.	Informa	ation about the parents									
	Check a	Check all that are true									
	(1)	Petitioner receives public assistance, Title XIX, or FIP.									
	(2)	Respondent receives public assistance, Title XIX, or FIP.									
	(3)	Petitioner plans to move within the next year.									
	(4)	Respondent plans to move within the next year.									
	(5) \bigcirc	This is the Parenting Plan for before the move.									
	$(6)\bigcirc$	This is the Parenting Plan for after the move.									
E.	Specia	I concerns about the parents									
	Check a	Il that are true									
	(1)	Petitioner has an alcohol or drug problem.									
	(2)	Respondent has an alcohol or drug problem.									
	(3)	Petitioner does not have a driver's license.									
	(4)	Respondent does not have a driver's license.									
	(5)	Petitioner's home environment is not suitable. Explain in 11.									
	(6)	Respondent's home environment is not suitable. Explain in 11.									
	(7)	Petitioner is in jail or a mental health institution. Explain in 11.									
	(8)	Respondent is in jail or a mental health institution. Explain in 11.									
	(9)	Petitioner is protected under a Domestic Abuse Protective Order. Explain in 11.									
	(10)	Respondent is protected under a Domestic Abuse Protective Order. Explain in 11.									
	(11)	Explain:									

Rule 17.200-Form 230: Proposed Parenting Plan, continued

2. Plan

- A. Read these definitions of legal custody and physical care:
 - (1) Legal custody means a parent has legal rights and responsibilities for the child. These include making decisions about medical care, education, extracurricular activities, and religious instruction.
 - (2) Joint legal custody means both parents have equal legal rights and responsibilities for the child. These include making decisions about medical care, education, extracurricular activities, and religious instruction.
 - (3) Physical care means providing the main home for the child and taking care of the child.
 - (4) **Joint physical care** means both parents have equal rights and responsibilities for providing

	the main home for the child and taking care of the child.
B.	Legal custody should be
	Check one
	(1) O Joint legal custody to both parents
	(2) To Petitioner
	(3) To Respondent
	(4) To other person
_	Full name of other person: first, middle, last
Ċ.	Physical care should be Check one
	(1) To Petitioner If you check (1), use D for Respondent's visitation.
	(2) To Respondent If you check (2), use D for Petitioner's visitation.
	(3) \bigcirc Joint physical care to both parents If you check (3), use $D(12)$ to explain the joint physical care schedule.
	(4) O To other person
_	Full name of other person: first, middle, last
D.	Visitation Use D only if one parent will have physical care. This is the schedule for the other parent to see the children.
	(1) Visitation for
	Check one
	a. Petitioner
	b. Respondent
	(2) Visitation permission
	Check a, b, or c.
	a. Visitation should not be allowed because:
	b. Visitation should be supervised because:
embe	er 2013 Rule 17 200—Form 230 Page 3 of 9

Rule 17.200-Form 230: Proposed Parenting Plan, continued

		The supe	rvisor	for visit	tation s	hould be	Suna	varienr	's full no	amo: fiv	et mid	Ala last		
	c. ()	Regular	unsup	pervise	ed visit	ation so	_					nie misi		
	Check all that apply													
	i. ii.		Reasonable visitation as the parents agree. Mid-week visitation on these days:											
		М	Tu	W	Th □	F			a.m.	to	n m			
		→ -	Ш.	<u>.</u>	Ш		FIUII	<u>'</u>			р.пі			_
	iii. (From	y week n	kend		at		\succ) a.m.) p.m. t	0		at	>) a.m.
		$\overline{}$				at	пе	-) p.m. t	Day of	week	7	ime)
	iv. (● Ever	Every other weekend			d 🗆			a.m.			□ a.m. at □ p.m. <i>Time</i>		
		FIOII	Day o	of week	;	at Tir	пе	_ ⊔	p.111. t	Day of	week	$\frac{1}{7}$	ime	_ p.iii.
	٧.	☐ Othe	r Des	cribe										
	vi. Visitation will start on													
(3)	Detailed	holiday	sched	dule										
	This sched												with the	narent
	who alread					y tilat is i	Cit bia	iik iiica		= Petiti			espond	
	Holiday				Time			Every yea			Even	years	Odd years	
							_	a.m.	P	R	P	R	P (R
	New Ye	ar's Eve				:	Ŏ	p.m.	$\frac{1}{2}$	$\frac{Q}{Q}$	Q	\overline{Q}	\bigcirc	\overline{Q}
	New Year's Day Martin Luther King, Jr. Day				:		a.m. p.m.	\downarrow O	\bigcirc	\bigcirc	\bigcirc	\circ	\bigcirc	
					:	_	a.m. p.m.		0	O	\circ	0	\circ	
	Preside	nt's Day				:	- X	a.m. p.m.		0	0	\bigcirc	0	\bigcirc
	Memoria	al Day				:	ΙĀ	a.m. p.m.		\overline{O}	O	\overline{O}	0	\overline{O}
	Independence Day July 4th				:	Q	a.m. p.m.	0	O	O	O	0	O	
	Labor D	ay				:	Q	a.m. p.m.	O	Ō	O	Ō	O	Ō
	Veteran	s' Day No	ovembe	r 11th		:	Q	a.m. p.m.	O	O	O	O	0	O
	Thanks	giving Da	у			:	Ō	a.m. p.m.	0	0	0	0	0	0
	Christm	as Eve				:	Q	a.m. p.m.	0	0	O	$\overline{\bigcirc}$	0	$\overline{\bigcirc}$
								a.m.	_	_				_

(4)

(5)

Rule 17.200-Form 230: Proposed Parenting Plan, continued

Mother	's Day	:	O a.m.	00	00	00				
Father'	Father's Day :									
Petition	ner's Birthday	:	O a.m. O p.m.	00	00	00				
Respo	ndent's Birthday	:	O a.m.	00	00	00				
Hallow	een October 31st	:	O a.m.	00	00	00				
Other:	Describe	:	Q a.m. O p.m.	00	00	00				
Other:	Describe	:	O a.m.	00	00	00				
 Check one a. If a holiday falls on a Friday or a Monday, the parent with the holiday will have the whole weekend. b. If a holiday falls on a Monday or a Friday, the alternating weekend schedule in 3.a.iii. will continue. c. If a holiday falls on a Monday or a Friday, the alternating weekend schedule in D(2)c.iv. will continue. This means the parent who has the children on the holiday weekend may have the children two weekends in a row. d. Other Explain										
Summer Check one a. Summer school vacation will be divided as Petitioner and Respondent agree. b. Petitioner and Respondent will each have one-half of the summer school vacation with alternate weekends to the other parent. The children will be returned to the parent with physical care at least one week before school starts.										
c. 🔾	The parent without physical care will have two weeks of uninterrupted summer visitation with the children and the parent with physical care will have two weeks of uninterrupted summer visitation with the children. During the rest of the summer the weekly visitation schedule should be followed.									

Continued on next page

Other Explain

Rule 17.200—Form 230: Proposed Parenting Plan, continued

(6)	Winter school holiday Check one
	Winter school holidays will be divided as Petitioner and Respondent agree.
	b. Petitioner and Respondent will each have one-half of the winter school holiday and alternate the first and second half each year.
	c. Other Explain
	<u> </u>
(7)	Spring school break
	Check one
	a. O Spring school break will be divided as Petitioner and Respondent agree.
	b. Spring school break will be alternated every other year between Petitioner and Respondent.
	c. Petitioner and Respondent will each have one-half of each spring school break.
	d. Other Explain
	d. O dile. Liquin
(8)	The children's birthdays
(-)	Check one
	a. O Petitioner and Respondent will have contact with the children on their birthdays as the parents may agree.
	b. A child's birthday will be spent with the parent who has the child on that day.
	c. Each child's birthday will be alternated from year to year between Petitioner and Respondent.
	d. O Petitioner and Respondent will each have no less than two hours of personal contact with the child on the child's birthday.
	e. Other Explain
(9)	Pick up and drop off
	Check all that apply
	a. The parents will agree about pick up and drop off for each visit.
	b. The parent with visitation will pick up the children at the other parent's residence at the beginning of visitation and the parent with physical care will pick up the children at the end of visitation.
	c. Only certain people can help the parents with transportation. If persons other than Petitioner and Respondent will help them provide transportation of the children,
	only the following people are permitted to help:

Rule 17.200—Form 230: Proposed Parenting Plan, continued
d. Other arrangements for visitation (for example, Petitioner and Respondent will meet at a location between their residences): Explain
at a location between their residences). Explain
(10) The parent without the children may contact the children by Check all that apply a. Calling the children Check one i. At reasonable hours ii. Any day from a.m. Phone number p.m.to p.m. Phone number where children can be contacted
b.
Email where children can be contacted
C. Other Explain
 (11) Changes to the schedule Check all that apply a. The parties may agree to additional visitation or changes to the schedule. b. If one parent fails to arrive at the appointed time, then the other parent will wait for at lease minutes before cancelling the visit. c. No changes allowed except by a court order. d. Other Explain
 (12) Joint physical care plan Use only if both Petitioner and Respondent are given joint physical care. a. How Petitioner and Respondent will make decisions about the children: For example, decisions on school, medical care, religion, and other decisions parents make for their children.
b. How the children's time will be divided between Petitioner and Respondent: You may use sections 3, 4, 5, 6, 7, and 8 for holidays, school breaks, and birthdays.

Rule 17.200—Form 230: Proposed Parenting Plan, continued

	b.	Go to mediation. Do not check if media or an injunction.	•	of domest	ic violence
		Present street address	City	State	ZIP code
		Name	Relationship to parties	Phone n	number
				(_)
	a.	Ask the following person to help them r	esolve disagreements:		
	Bet	fore going to court to resolve disagreemen	ts, Petitioner and Respo	ndent will	
	Che	eck one			
(13)	Re	solving disagreements			
	e.	Other issues:			
		children (including changes due to the ch	ildren's age and develop	ment):	
	d.	How Petitioner and Respondent will deal	with major changes or d	isagreem	ents about the
		una schoorjees.			
	C.	How the children's expenses will be paid: and school fees.		ich as clot	hes, activities,
	C	How the children's expenses will be paid:	For example expenses of	ich as clot	hos activities

Continued on next page

Rule 17.200—Form 230: Proposed Parenting Plan, continued

3.	Attori Check of	ney Help									
	A. An attorney did not help me prepare or fill in this paper.										
	в. С	An attorney									
	J. ()	If you check B.		-							
		Name of attorn	ey or organizat	tion, if any		Attorney 's P.I.N.	# -Ask	the attorn	ney	_	
		Business addre	ss of attorney o	or organizat	ion	City		State	ZIP code	_	
		()		()						
		Attorney's pho	ne number	Attorney	s fax	number – optional	Attori	ney 's ema	iil address – optiona	ıi	
4.	Certif	ication of S	ervice by N	/lailing o	r Del	ivery					
			-	_		ther party is exem	pt from	electronic	filing.		
			-		-	e served on registe	-				
	Ι,			.,,	certify	that on			, 20		
	Print	your name				Month		Day	v Year		
			•	osed Parei	nting F	Plan to the other	party or	the othe	er party's		
	attorne	y at this addres	SS:								
	Name o	f person to whom	n I delivered or	mailed it							
		, 1									
	Darty's	or attorney's mo	riling addrags		City			State	ZIP code	-	
	1 ariy s	or anomey s me	uung aaaress		City			State	ZII Code		
5.	Oath	and Signatu	ıre								
	This P	roposed Parent	ing Plan addre	esses all ci	ustody	and visitation is	sues in	our divo	rce. I want the		
	court to	approve this F	Proposed Pare	enting Plan	and n	nake it a part of t	he final	Decree.			
	I.				certify	under penalty o	of periun	v and pu	rsuant to the		
		t your name			,	, -		,			
	laws of	the State of Io	wa that I have	read this I	Propos	sed Parenting Pla	an, and	I agree v	with the Plan and	b	
	the info	ormation. I ask	the court to a	dopt this P	ropose	ed Parenting Pla	n.				
				20							
	Month		Day	Year Year	_	Your signature*				_	
	Mailina	g address			City			State	ZIP code	_	
	Manne	auur ess			City			Diale	ZII code		
	()									
	Phone r	number	E	Email addre:	SS	A	dditiona	l email ac	ldress – if available		
	* Wheth	ner filing electroni	cally or in paper,	you must ha	ndwrite	your signature on th	his form.	If you are	filing electronically	,	
	scan 1	he form after signi	ng it and then fil	e electronica	lly.						
Dec	ember 20	13		Rule 1	17.200—	-Form 230			Page 9 of	9	

Rules 17.201 to 17.299 Reserved.

Rule 17.300 Forms for modifying child support. The following forms are for use in actions to modify a current child support order from an Iowa court. [Court Order December 19, 2013]

	HILD SUPPORT O	INL I	T CLEARLY
A. IN THE DISTRICT COURT FOR			OUNTY, IOW
, , ,	e the current child suppo		
. Upon the Petition of		Equity case 1	num ber:
	-	Application t	
ETITIONER (As it is in the original case)		Child Suppo (CLERK STAM	
S			
ESPONDENT (As it is in the original case)			
Stop! You must file this form in the same c	-	_	port order
entered. If you cannot file it in the same cou	mty, see an attorney	y.	
C. Personal Information			
Applicant's (your) name, year of birth and pres	ent residence:		
(Full name)		ear of birth)	
(Present street address)	(City)	(State)	(ZIP Code)
	()	
(County)	•	hone number)	
. Other parent's name, year of birth, and present	t residence:		
(Full name)		ear of birth)	
(Present street address)	(City)	(State)	(ZIP Code)
(1 reserve server additions)			
·	(_)	
(County)	()_ hone number)	
(County) If someone other than a parent gets child supp	·	,	me, year of
(County) If someone other than a parent gets child supp	·	,	me, year of
(County) If someone other than a parent gets child supp irth, and present address:	ort in this case, write	e the person's nar	me, year of
(County) If someone other than a parent gets child supp	ort in this case, write	,	me, year of
(County) If someone other than a parent gets child supp irth, and present address:	ort in this case, write	e the person's nar	me, year of
(County) If someone other than a parent gets child suppointh, and present address: (Full name)	ort in this case, write	e the person's nar	

D. GENERAL INFORMATION ABOUT THIS CASE	
4. Information about the current child support order:	
a. Date entered: /(Month) / (Day) / (Year)	
b. County and state where the current order is en	tered:
c. Case number on the current child support orde	r:
d. (Name)	pays child support in this case.
(Name)	
e. The current child support payment is: \$	per (Week or month)
5. (Check if true.) A copy of the current child sup	port order is attached.
6. (Check all that are true.)	
☐ The Child Support Recovery Unit (CSRU) is	involved in this case.
☐ The Collection Services Center (CSC) is invo	
7. (Check if true.)	
- ' _ '	child or children involved in this case. They are: formation.)
Case # County &	z State
Case # County &	z State
8. The following children are covered by the current	child support order
First, middle & last	First, middle & last
initials of each child Year of birth	initials of each child Year of birth
(1)	(5)
(2)	(6)
(3)	(7)
(4)	(8)
Note: If you need more lines to list the children, attac	h a separate sheet and check this box:
► Stop! If there is a court order that sets up cus cannot use this form. Talk to an attorney if you no	
Earn El 17201	2 - 5 4

Child support should be changed because: (Check all that are true.) a. There is a juvenile court order that changed where the child or children were living. The person paying support has custody of the children. (If you check a., write in the county where the juvenile court order was entered and the case number.)
County: Case #:
 b. ☐ One or more of the children live with the parent who is paying support. There is no court order that sets up custody. c. ☐ One or more of the children no longer qualify for child support. d. ☐ My income has gone down. e. ☐ The other parent's income has gone up. f. ☐ Other reason (explain):
Child support should be: (Check all that apply; if you check more than one please explain on the blank lines.) a. Raised
b. Lowered
c. Stopped
 Tax deduction for the child or children. (Check the one that is true.) a. There is no court order at this time on tax deductions. b. A court order currently says who gets the tax deduction for the child or children and it should stay the same. c. A court order currently says who gets the tax deduction for the child or children and it should be changed. Health care expenses for the child or children. (Check the one that is true.) a. There is no court order at this time on who pays health care expenses. b. A court order currently says who pays for health care expenses for the child or children and it should stay the same. c. A court order currently says who pays for health care expenses and it should be changed. (If you check this box, explain what you want in below.)
The other party is: (Check all that are true.) (If you check a. or b. see the instructions.)
a. In the military service. (Give the location.)
b. In prison or jail. (Give the location.)
(Check if true.) There is a "protective order" or a "no contact order" between any of the parties and me. If you check the box, write in the following information (Required):
a. County and state where the order came from:
b. Court case number:

15. Other information:										
D. D. C.										
E. REQUEST OF THE APPLICANT (You are the A	pplicant)									
 Applicant asks the court to: (Check all that apparent asks) Raise the current child support payment 										
b. Lower the current child support paymer										
 c. End the current child support payment. d. Set child support for the parent who doe 	es not have the child	lren.								
e. Change who gets the tax deduction for t	the child or children	l.								
f. Change who pays for health care expense. Order that the other party pay the court		children.								
h. Order that the other party pay my attorn										
i. U Other request:										
F. ATTORNEY HELP										
(Check one.) a. An attorney did not help me p b. An attorney helped me prepar (If you check b., you must fill in t	re or fill in this pape	er.								
(Name of attorney or organization, if any)	(Attorney's P.I.N	T. # – Ask the attorney)								
(Business address of attorney or organization)	(City)	(State) (ZIP Code)								
()	()									
(Attorney's phone number – Required)	(Attorney's fax n	umber, if there is one)								
G. OATH AND SIGNATURE										
I,		alty of perjury and pursuant to								
the laws of the state of Iowa that the information I correct.	have provided in th	is Application is true and								
(Your signature – Required)										
(Your mailing address – Required)	City – Required)	(State, ZIP Code – Required)								
(E-mail address – Optional)	(number– Optional)								
	,									
NOTICE TO APPLICANT: You must serve this form as If the Child Support Recovery Unit (CSRU) is involved in forms on the CSRU. See the instructions for forms	n this case (see item 6,									
	301, page 4 of 4									

FL-17.302 Application Coversheet for a Modification Of Chi	LD SUPPORT ONLY
1. NAME & ADDRESS of Applicant	FOR COURT USE ONLY CASE NUMBER:
Applicant's Name	COUNTY WHERE CASE WAS FILED:
Applicant's Street Address City, State, ZIP Code	_
Applicant's Telephone Number: ()	
2. CASE NAME (As it is in the Application)	
Petitioner	
vs.	
Respondent	

3. NATURE OF THE CASE: Check the box to the <u>left</u> of the <u>one</u> case category that most accurately describes your primary case. If you are making more than one type of claim, check the one that involves the largest amount of damages or the one you consider most important.

Check one in this column								
LAW: Cont	tract/ Commercial Claim	lacksquare	EQUITY - Domestic Relations		EQUITY - Other			
Debt collection	(LA-C1)		Dissolution children involved (CD DC)		Mortgage foreclosure (EQ-EM)			
Employment-re	lated claim (LA-C3)		Dissolution no children (CD DN)		Other real property claim (EQ-ER)			
Other contract	or commercial claim (LA-C9)		Modification children involved (CD-MC)		Other equity (EQ-EO)			
			Modification no children (CD MN)					
LAW: Tort	- Personal Injury (P.I.)		236 Domestic abuse (DA DA)		OTHER CIVIL ACTIONS			
Motor vehicle a	accident (LA-T2)		234 Foster care (DR D1)		Administrative appeal to dist. court (CV-V1			

	Modification no children (CD MN)	
LAW: Tort - Personal Injury (P.I.)	236 Domestic abuse (DA DA)	OTHER CIVIL ACTIONS
Motor vehicle accident (LA-T2)	234 Foster care (DR D1)	Administrative appeal to dist. court (CV-V1)
Premises liability / slip & fall (LA-T3)	252 A Support action (FL-D2)	Change of name (CN-CN)
Malpractice: medical or dental (LA-T1)	252 A.18 - Foreign support (DR-D3)	Distress warrant (CV-V2)
Products liability (toxic chem. / subst.) (LA-T8)	252B.11 - Cost recovery (DR-D4)	Foreign judgment entry (CV-V3)
Products liability (not toxic substance) (LA-T4)	252C - Administrative Order (DR-D5)	Lien (LN - IE, IH, IM or IO)
Wrongful death (LA-T7)	252D - Income withholding (DR-D6)	Post conviction relief (PC-PC)
Other negligent / intentional P.I. (LA-T9)	252E - Medical support (DR-D7)	Seized property / forfeiture (SP-SP)
	252F/ . 600B Paternity (DR D8)	Transcript of judgment (TJ-TJ)
LAW: Tort - Other damages (no P.I.)	252K - UFISA (DR-R1)	Other civil action (CV-V9)
Professional malpractice - no P.I. (LA-T5)	598B Out of state custody (DR R2)	FOR COURT USE ONLY
Fraud / business tort (LA - C2)	-600 Adoption (AT AT)	
Other tort - property/financial damages (LA-T6)	Other domestic relations action (DR D9)	

*NOTE TO APPLICANT:

- Pursuant to 1.301(2) of the Iowa Rules of Civil Procedure, a cover sheet must accompany each civil petition except: small claims, probate, or commitment actions.
- □ DO NOT SERVE THIS COVER SHEET ON THE RESPONDENT (the other parent).
- ☐ A cover sheet is not required when filing a counterclaim or cross-claim.
- ☐ This cover sheet is for statistical purposes only. It shall have no legal effect in the case.

FL-17.303 CONFIDENTIAL INFORMATION FORM

A. IN THE DISTRICT COURT FOR			Cou	NTY, IOWA
	(County where A	Application is filed)		
B. UPON THE PETITION OF		F	Equity case num	nber:
			ential Informa ERK STAMPS	
PETITIONER (As it is in the Application)				
vs				
RESPONDENT (As it is in the Application)				
C. APPLICANT'S INFORMATION (The per		Anniantian to make	J.: 1 J	
APPLICANT SINFORMATION (The per	son wno jues ine	Аррисанов ю томуу с	тия ѕиррогі)	
Name:	First	Λ	1iddle	
Address:		City	State	ZIP Code
Soc. Security #:		rivers License #:		
Birth Date:		Telephone #:		
Employer:				
Employer's Address: Street Number		City	State	ZIP Code
Employer's Telephone #:				
D. OTHER PARTY'S INFORMATION				
Name:			6. 1.77	
Last	First	Λ	1iddle	
Address:Street Number		City	State	ZIP Code
Soc. Security #:	Dr	rivers License #:		
Birth Date:	Te	lephone #:		

FL-17.303 CONFIDENTIAL INFORMATION FORM

Employer:Employer's Address:					
	treet Number	City	State	ZIP Code	
Employer's Telephone #: _					
E. CHILDREN'S INFORM	ATION				
Fill in the name and other	information for each child in t	this case:			
1 Name:					
1. Name:	First		Middle		
Soc. Security #:		Birth Date:			
2 Name					
2. Name:	First		Middle		
Soc. Security #:		Birth Date:			
_					
3. Name:	First		Middle		
_					
4. Name:	First		Middle		
	1.11.21				
soc. security #:					
5. Name:					
			Middle		
If there are more than five children, attach an additional sheet with this same information for the others and check here: \Box					
F. SIGNATURE					
knowledge the information 234, 252A, 252C, 252F,	it the above information in con will be used to enforce any statement of the District Court or the story of the District Court or the story of the District Change.	upport Order under ovided for in Sect	the <i>Code of I</i> tion 598. The	owa, Chapters parties must	
	1 ,				
Information given by:(Print your full name)					
	(1 mayou jud name)				
(You	r signature)		(Date)		

 $\frac{\text{IMPORTANT NOTICE}}{\text{CLERK OF DISTRICT COURT}} \text{DO } \frac{\text{NOT}}{\text{CLERK OF DISTRICT COURT}} \text{DO } \frac{\text{NOT}}{\text{CLERK OF DISTRICT COURT}}$

Form FL-17.303, page 2 of 2

FL-17.304 Original Notice For Personal	SERVICE PRINT CLEARLY
A. IN THE DISTRICT COURT FOR	County, Iowa
(County wh	here the Application is filed)
B. UPON THE PETITION OF	Equity case number:
	Original Notice for Personal Service (CLERK STAMPS HERE)
PETITIONER (As it is in the Application)	
VS	
RESPONDENT (As it is in the Application)	
C. TO (Print name(s) clearly):	
	lawsuit asking for a change in child support. Child Support Only is attached to this Notice. orney. (Applicant's address)
()	(
(Applicant's phone number)	(Applicant's fax number, if any)
 within 20 days after you receive this Origin FL-17.301 you may use Answer form FL After you file your Answer or Motion, you parties. If you do not file an Answer or Motion wit may enter a judgment against you granting 	the clerk of district court in the above county nal Notice. If you received Application form 17.315. must serve a copy of it on the other party or hin 20 days after receiving this Notice, the court the Applicant's requests in the Application. rt due to a disability, immediately call your
district ADA coordinator at impaired, call Relay Iowa TTY at 1-800-73	. If you are hearing 35-2942.
(seal) Clerk	of Court or Designee:
County Courthouse,	in, Iowa
IMPOR	TANT:
YOU SHOULD TALK TO AN ATTORNEY A	T ONCE TO PROTECT YOUR INTERESTS.

Form FL-17.304, page 1 of 1

FL-17.305 ACCEPTANCE OF SERVICE

]	PRINT CLEARLY		
A. In the District Court for			OUNTY, IOWA
(C	County where the Application	on is filed)	
B. Upon the Petition of		Equity cas	e number:
			e of Service IMPS HERE)
PETITIONER (As it is in the Application)		,	
(· · · · · · · · · · · · · · · · · ·			
vs			
RESPONDENT (As it is in the Application)			
C. ACCEPTANCE OF SERVICE, OATH, AN	D SIGNATURE		
, 20			
(Date)	(Served Party's	signature – Required	
(Served Party's mailing address)	(City)	(State)	(ZIP Code)
(Phone number, if available)	(Fax number, if	available)	
By signing this you are not agreeing to received a copy of the			ngree that you
Form FL	-17.305, page 1 of 1		

FL-17.306 DIRECTIONS FOR SERVICE OF ORIGINAL NOTICE

PRINT CLEARLY

RAME AND LOCATION OF SHERIFF OR OTHI ERIFF: County (Address) (City, State, and ZIP Code)	ER PROCESS SERVER (Check one and fill in b OTHER PROCESS SERVER: (Name of other person serving the Notice) (Address)
(Address)	(Name of other person serving the Notice)
(Address)	
. ,	
. ,	(Address)
(City, State, and ZIP Code)	
	(City, State, and ZIP Code)
PERSON TO BE SERVED:	D. PERSON REQUESTING SERVICE:
(Name of person being served)	(Name of person requesting service)
(Address)	(Address)
(City, State, and ZIP Code)	(City, State, and ZIP Code)
	()
(Phone number)	(Phone number)
COSTS OF SERVICE: (Check one.)	
☐ Applicant will pay the Sheriff or other	r process server.
☐ Deferred by court order:(Cle	erk of Court: Sign only if deferred by court order)
☐ Deferred by court order: (Cle AFTER COMPLETION OF SERVICE, NOTIFY	
(Clé	THE PERSON REQUESTING SERVICE.

FL-17.309 APPLICATION AND AFFIDAVIT TO DEFER PAYMENT OF COSTS PRINT CLEARLY

County where the Application is filed B. UPON THE PETITION	A. IN THE DISTRICT COURT FOR	County, Iowa
Application and Affidavit to Defer Payment of Costs (CLERK STAMPS HERE) C. REQUEST My name is:	(County where the App	lication is filed)
Defer Payment of Costs (CLERK STAMPS HERE) RESPONDENT (As it is in the Application) C. REQUEST My name is:	B. UPON THE PETITION	Equity case number:
ESPONDENT (As it is in the Application) C. REQUEST My name is:		Defer Payment of Costs
C. REQUEST My name is:	ETITIONER (As it is in the Application)	(CLERK STAWI STIERL)
C. REQUEST 1. My name is:	s	
 My name is:	ESPONDENT (As it is in the Application)	_
 My name is:		
 My name is:		
 My name is:		
 2. (Check all that apply.) a.	_	
 a.	My name is:	(Print clearly.)
 3. Number of people living in my household: 4. My household income is \$ per month. (Put the amount of all income and benefits before deductions.) 5. List where your household income comes from (examples: employer or benefits such as 	 a.	d without prepayment of costs and fees in good faith.
 4. My household income is \$ per month. (Put the amount of all income and benefits before deductions.) 5. List where your household income comes from (examples: employer or benefits such as 	D. FINANCIAL INFORMATION	
(Put the amount of all income and benefits before deductions.) 5. List where your household income comes from (examples: employer or benefits such as	3. Number of people living in my household:	
-		
unemployment, Title 19, FIP):		
	unemployment, Title 19, FIP):	

6. My household has the follow	ring monthly exp	enses:	
a. Rent or mortgage	\$		
b. Utilities	\$		
c. Telephone	\$		
d. Food	\$		
e. Transportation	\$		
7. I have \$	_ in cash, check	ing and savings.	
E. ATTORNEY HELP			
in the followin	ng information.)		per. (If you check b., you must fill
(Name of attorney or organization,	if any)	(Attorney's P.I.	N. #-Ask the attorney)
(Business address of attorney or org	anization)	(City)	(State) (ZIP Code)
()(Attorney's phone number – Require	d)	()(Attorney's fax	number, if there is one)
F. OATH AND SIGNATURE			
I,			, 20 , (Year) rty's attorney at this address:
(Name of person to whom I del	ivered or mailed it)		
(Person's street address)		(City)	(State) (ZIP Code)
I also certify under penalty of perjuthis form and that the information I	have provided i	n it is true and co	
(Your sig	gnature – Required)		
(Your mailing address – Required)	(0	Tity – Required)	(State, ZIP Code – Required)
(E-mail address – Optional)		(Fa	ax number – Optional)
	Form FL-17.	309, page 2 of 2	

[Court Order June 17, 2008] Form FL-17.310 to Form FL-17.314: Reserved

FL-17.315 ANSWER TO APPLICATION TO MODIFY CHILD SUPPORT ONLY

PRINT	CELARET		
A. IN THE DISTRICT COURT FOR		Cot	JNTY, IOWA
	wwhere the Application is file		,
B. Upon the Petition of		Equity case n	umber:
		Answer to App Iodify Child Su (CLERK STAM	pport Only
ETITIONER (As it is in the Application)			
vs.			
RESPONDENT (As it is in the Application)			
Child Support on form FL-17.301. For al form.	i other situations, see t	ne msu uchon	3 101 11113
form. C. PERSONAL INFORMATION (Check only one. If you check the second box, fill The Applicant's year of birth and present	<i>in the blanks.)</i> residence are correct in		
form. C. PERSONAL INFORMATION (Check only one. If you check the second box, fill	in the blanks.) residence are correct in residence are:		
form. C. PERSONAL INFORMATION (Check only one. If you check the second box, fill The Applicant's year of birth and present The Applicant's year of birth and present (Name)	in the blanks.) Tresidence are correct in residence are:	the Application	on.
form. C. PERSONAL INFORMATION (Check only one. If you check the second box, fill The Applicant's year of birth and present The Applicant's year of birth and present	in the blanks.) residence are correct in residence are:	the Application	
form. C. PERSONAL INFORMATION (Check only one. If you check the second box, fill The Applicant's year of birth and present The Applicant's year of birth and present (Name)	in the blanks.) Tresidence are correct in the residence are: (Year (City)	the Application	on.
form. C. PERSONAL INFORMATION (Check only one. If you check the second box, fill The Applicant's year of birth and present The Applicant's year of birth and present (Name) (Present street address)	in the blanks.) Tresidence are correct in the residence are: (Year (City) (Phonom of the blanks.) The correct in the Application of the correct in the Application.	the Application of birth) (State)	on.
C. PERSONAL INFORMATION (Check only one. If you check the second box, fill The Applicant's year of birth and present (Name) (Present street address) (County) Response (Check only one. If you check the second box, fill (My year of birth and present residence and present street address)	in the blanks.) The residence are correct in the residence are: (Year (City) (Phonomial box, fill in the blanks.) The correct in the Application:	the Application of birth) (State)	on.

Form FL-17.315, page 1 of 5

(Phone number)

(County)

 Check only one. If you check the third box, fill in the There is no non-parent who gets child support The year of birth and present residence of the Application. The correct identifying information for the There is no non-parent who gets child support the Application. 	ort in this case. the non-parent getting	
(Name)	(Ye	ar of birth)
(Present street address)	(City)	(State) (ZIP Code)
(County)	()_	(Phone number)
D. GENERAL INFORMATION ABOUT THIS CASE	2	
a. (Check only one. If you check the second bo The date of the current child support ord The correct date of the current child support	der is correct in the Ap	•
 The correct date of the current child sup b. (Check only one. If you check the second be The county and state of the current child The correct county and state of the current 	ox, fill in the blanks.) I support order are cor	rect in the Application.
County:		State:
c. (Check only one. If you check the second bo The case number of the current child su The correct case number of the current of	pport order is correct i	
d. (Check only one. If you check the second be		ild support.
☐ The correct information is that (name)_		pays child
support in this case and (name)		receives child support.
e. (Check only one. If you check the second bo	ount of child support o	
☐ The correct currently ordered child sup	port payment is: \$	per
5. (Check only one.) a. A copy of the current child support order b. A copy of the current child support order	er was attached to the	Application.
6. (Check only one. If you check the second box, fa. The Child Support Recovery Unit and/or b. The child support recovery unit and/or the child support recovery unit and the child suppo	r the Collection Servic	
The CSC number for payments is		·

b. There are oth	ner child support cas	ses for the child or children involved in this case. They a
Case #	, Cou	inty and State
		inty and State
a. The Applica order.b. The Applica	tion correctly idention does not correcter. (Identify the child	It box, fill in the blanks.) fies the children covered by the current child support tly identify the children covered by the current child dren covered.) The following children are covered by the
First, middle & last in	itials of each child	Year of birth
(1)		
(2)		
(3)		
(4)		
\ /		
(5)		
(5) <u>(</u> 6) <u></u>		additional child or children, check this box .)
(5)	charate sheet with and the sheet with and there is a juvenite that there is a juvenite that the child or child or child court order the sheet with an and the sheet with an analysis of th	ile court order changing placement and that the person ildren. that gives care of the child to the party paying support.
(5)	charate sheet with and the child or child court order child court order child or chi	ile court order changing placement and that the person
(5)	that one or more of the that of th	ile court order changing placement and that the person ildren. that gives care of the child to the party paying support. the children now live with the person paying support.
(a. (Check only one paying suppor There is no lit is correct None of the C. (Check only one It is correct There has be d. (Check only one I agree that the control of the	charate sheet with and that there is a juvenite that the child or chipiuvenile court order children live with the children live with the children live with the character or change in the children party's incention.	ile court order changing placement and that the person ildren. that gives care of the child to the party paying support. the children now live with the person paying support. ne person who is ordered to pay support. the children no longer qualifies for support.

My response to the other reason in the Application	on:	
Child support should: (Check all that apply. If you che lines.)a. Be raised	eck more than	one, explain on the blank
b. Be lowered		
c. Be stopped		
d. Not be changed		
 (Check only one.) a. There is no court order at this time on tax ded b. A court order currently says who gets the tax should stay the same. c. A court order currently says who gets the tax should be changed. 	deduction for t	he child or children and it
2. (Check only one.)		
a. There is no court order at this time on who pa	ys for health c	are expenses for the child or
children.	1th	as for the shild or shildren
b. A court order currently says who pays for hea and it should stay the same.	ith care expens	ses for the child or children
c. A court order currently says who pays for hea	Ith care expens	ses for the child or children
and it should be changed.		
I am: (Check all that are true and fill in the blanks fo	r the ones you	check.)
a. In the military service. (Give the location.)		
b. In prison or jail. (Give the location.)		
. (Check if true, and fill in the blanks if you check the back order) There is a "protective order" or a "no contact this box is checked, write in the following info	order" between	
(County)	(State)	(Case number)
5. Other:	(···- -)	(- 3.00
o outer		

E. REQUEST		
a. Dismiss the request for a change in or b. Raise child support. c. Lower child support completely. d. Stop child support completely. e. Leave the dependant's deduction for f. Change the party who gets the depeng. Leave the responsibility for health in h. Change the responsibility for health i. Order that the other party pay my att k. Other request:	r income tax unchanged ndant's deduction for in nsurance expenses unch insurance expenses. urt fees.	come tax.
		n this paper. paper. (If you check b., you must
(Name of attorney or organization, if any)	(Attorney's P.I.N	. # – Ask the attorney)
(Business address of attorney or organization)	(City)	(State) (ZIP Code)
(Attorney's phone number – Required)	() (Attorney's fax n	umber, if there is one)
G. OATH AND SIGNATURE		
I,	r party or the other part	
(Maine of person to whom I detivered of main	cu uj	
(Person's street address)	(City)	(State) (ZIP Code)
I also certify under penalty of perjury and pursu this form and that the information I have provide		
(Your signature - Requ	ired)	
(Your mailing address – Required)	(City – Required)	(State, ZIP Code – Required)
(E-mail address – Optional)	(Fax	number – Optional)
Form EI	.17 315 page 5 of 5	

FL-17.316 GENERAL ANSWER TO APPLICATION TO MODIFY CHILD SUPPORT ONLY

PRINT CLEARLY

A. IN THE DISTRICT COURT FOR(County where Application County where County where	COUNTY, IOWA ion is filed) Equity case number:
B. UPON THE PETITION OF	Equity case number:
	General Answer to Application to Modify Child Support Only
PETITIONER (As it is in the Application)	(CLERK STAMPS HERE)
vs	
RESPONDENT (As it is in the Application)	
➤ STOP! If you are responding to an Application labeled F Use form FL-17.315	L-17.301 → do not use this form
C. Answer	
_	
I. I admit that these paragraphs in the Application are true:	
(List the numbers of the paragraphs in the Application that you think are true.	.)
2. I deny these paragraphs in the Application are true:	
(List the numbers of the paragraphs in the Application that you think are false	2.)
3. I do not know whether these paragraphs in the Application are	true:
(List the numbers of the paragraphs in the Application that you are not sure a	about.)
4. I deny anything in the Application that is not admitted in this A	answer.
5. Other information:	

D. REQUEST	
ask the court to:	
E. ATTORNEY HELP	
	ne prepare or fill in this paper. spare or fill in this paper. (If you check b., you must file)
(Name of attorney or organization, if any)	(Attorney's P.I.N. # – Ask the attorney)
(Business address of attorney or organization)	(City) (State) (ZIP Code)
)(Attorney's phone number – Required)	(Attorney's fax number, if there is one)
(Attorney's phone number – Required)	(Attorney's fax number, if there is one)
F. OATH AND SIGNATURE	
	certify that on 20
,(Print your name)	
mailed or gave a copy of this form to the other	party or the other party's attorney at this address:
(Name of person to whom I delivered or maile	
(Person's street address)	(City) (State) (ZIP Code)
,	ant to the laws of the state of Iowa that I have read
his form and that the information I have provide	
(Your signature – Requi	ired)
(Your mailing address – Required)	(City – Required) (State, ZIP Code – Required)
	()
(E-mail address – Optional)	(Fax number – Optional)
Form FI	-17.316, page 2 of 2

[Court Order June 17, 2008] Form FL-17.317 to Form FL-17.321: Reserved

FL-17.322 MOTION PRINT CLE	EARLY
A. In the District Court for	County, Iowa
(County where	e the Application is filed)
B. Upon the Petition	Case Number:
	Motion (CLERK STAMPS HERE)
PETITIONER (As it is in the Application)	
vs.	
RESPONDENT (As it is in the Application)	
C. Request	
My name is:	
b. Set a hearing date for a modification	n set for, 20 of child support.
3. I am making this request because:	
A ATTODNING HOLD	
D. ATTORNEY HELP	
	elp me prepare or fill in this paper. et prepare or fill in this paper. (If you check b., you must mation.)
(Name of attorney or organization, if any)	(Attorney's P.I.N. # – Ask the attorney)
(Business address of attorney or organization)	(City) (State) (ZIP Code)
()	()
((Attorney's fax number, if there is one)

I,	, certify that o	on	, 20
(Print your name)			
I mailed or gave a copy of this form to the other	er party or the other	party's attorr	ney at this address:
(Name of person to whom I delivered or mai	led it)		
(D)'	(C:4.)	(C4 4)	(7ID C - 1-)
(Person's street address)	(City)	(State)	(ZIP Code)
,		, ,	,
(Person's street address) I also certify under penalty of perjury and pursthis form and that the information I have provi	uant to the laws of	the state of Io	,
I also certify under penalty of perjury and purs	uant to the laws of	the state of Io	,
I also certify under penalty of perjury and purs this form and that the information I have provi	tuant to the laws of ded in it is true and	the state of Io correct.	wa that I have read
I also certify under penalty of perjury and purs	tuant to the laws of ded in it is true and	the state of Io	wa that I have read
I also certify under penalty of perjury and purs this form and that the information I have provi	tuant to the laws of ded in it is true and	the state of Io correct.	wa that I have read
I also certify under penalty of perjury and purs this form and that the information I have provi (Your signature – Required)	tuant to the laws of ded in it is true and	the state of Io correct.	wa that I have read
I also certify under penalty of perjury and purs this form and that the information I have provi (Your signature – Required)	tuant to the laws of ded in it is true and	the state of Io correct.	wa that I have read
I also certify under penalty of perjury and purs this form and that the information I have provi (Your signature – Required)	tuant to the laws of ded in it is true and	the state of Io correct.	wa that I have read
I also certify under penalty of perjury and purs this form and that the information I have provi (Your signature – Required)	tuant to the laws of ded in it is true and	the state of Io correct. State, ZIP Code	wa that I have read

FL-17.323 RESPONSE TO A MOTION

PRINT CLEARLY

A. IN THE DISTRICT COURT FOR			County, Iowa
(County where y	ou're the Application is fil	ed)	
B. Upon the Petition of	Γ	Equity case	e number:
PETITIONER (As it is in the Application) VS.		Response to	
RESPONDENT (As it is in the Application)			
C. RESPONSE TO THE MOTION			
1. My name is			
2. The other party filed a Motion on (date stamped			, 20 .
3. My response to the Motion: (Check one; if you	ı check "a.," write y	(Month & day) Our reason on ti	(Year) he blank lines.)
a. I object to the request(s) in the Motion			,
b. I do not object to the request(s) in the	Motion		
D. ATTORNEY HELP			
(Check one.) a. An attorney did not help me b. An attorney helped me prep in the following information.)			b., you must fill
(Name of attorney or organization, if any)	(Attorney's P.I.	N. # – Ask the atto	rney)
(Business address of attorney or organization)	(City)	(State)	(ZIP Code)
()(Attorney's phone number – Required)	(Attorney's far	number, if there is	one)
(Amorney o prone manoer Required)	(Intollies s fax		

Form FL-17.323, page 1 of 2

	certify that on		, 20 .
(Print your name)	certify that on _	(Month &	day) (Year)
mailed or gave a copy of this form to the	other party or the other pa	rty's attorn	ey at this address:
(Name of person to whom I delivered or	mailed it)		
(Person's street address)	(City)	(State)	(ZIP Code)
also certify under penalty of perjury and p	oursuant to the laws of the	state of Io	,
also certify under penalty of perjury and phis form and that the information I have pr	oursuant to the laws of the	e state of Ior prrect.	wa that I have read
I also certify under penalty of perjury and pathis form and that the information I have pr	ursuant to the laws of the ovided in it is true and co	e state of Ior prrect.	wa that I have read
also certify under penalty of perjury and phis form and that the information I have pr	ursuant to the laws of the ovided in it is true and co	e state of Iovorrect.	wa that I have read
I also certify under penalty of perjury and phis form and that the information I have professional (Your signature –	ovided in it is true and co	e state of Iovorrect.	wa that I have read

FL-17.324 CHILD SUPPORT MODIFICATION FINANCIAL STATEMENT

Print	CLEARLY
A. In the District Court for	County, Iowa
	unty where the Application is filed) Equity case number:
B. Upon the Petition of	Equity case number.
	Child Support Modification Financial Statement
PETITIONER (As it is in the Application)	(CLERK STAMPS HERE)
vs	
RESPONDENT (As it is in the Application)	
I, (print your name)	, state that the following is a true and
I, (print your name)	:
C. My Income	
(Because this financial statement will become payour employer(s).) 1. Income from my employment	ublic record, you are not required to list the name of
a. Job / Title:	b. Job / Title:
Gross income: \$ per	Gross income: \$ per
Net income: \$ per	Net income: \$per
After taxes (week or month) After taxes (week or month)
_	ı
2. Other Income: \$ per	Describe source of income:
3. Income from Social Security Disability (SS	
a. Total SSD benefits paid to you for <u>your</u> disab (1) Amount paid for your expenses:	lity: \$ per month
(2) Amount paid for your children's expense	s: \$ per month

b. List the initials (first, middle, last) a benefits:	and bi	rth year of	the children	in your home v	who receive SSD
Child's initials (first, middle, last	t)	Birth year	:		
(1)					
(2)					
(3)					
(4)					
(5)					
c. The following are my children who someone else:	recei	ve Social S	Security Disa	ibility benefits l	but live with
		nt of SSD b		-	n receiving payment:
(1)					
(2)					
(3)	,				
(4)					
(5)	\$		per month		
e. Total SSD benefits paid to you beca	•		spouse of the	-	nt:
D. My DEDUCTIONS					
4. Tax Status: a. I am currently married to the orb. I have custody of the child or c5. Number of exemptions: Yourself:	hildre	en in this c	ase. <i>(Check o</i>	Yes Yes	□ No □ No
6. Income tax withheld: Federal:		\$		per	_
State:		\$		per	-
7. FICA (Social Security & Medicare)):	\$		per	_
8. Mandatory pension contribution:		\$		per	_
9. Union dues:		\$		per	_
10. Dependent health insurance premi	um:			per	
		-			-

 Actual medical support paid for th Paid to: 	e child or children as	required by co Amount:	ourt order:
		\$	per
			per
		\$	per
2. Parent's medical expenses that have	ve not been paid by ir	nsurance: \$	per
This includes individual health insurance y insurance but the amount cannot excee		al health care e	xpenses that are no
3. Prior court-ordered child support of Paid to:	or alimony:	Amount:	
		\$	per
		\$	per
4. Qualified additional dependent of East the name and birth year of each children covered by the child supp	deduction ch child you are the l	\$egal parent of.	per
4. Qualified additional dependent of List the name and birth year of each children covered by the child support Child's initials (First, middle, last) b	deduction ch child you are the le port order involved in Birth year:	\$egal parent of. n this case.	per
4. Qualified additional dependent of List the name and birth year of each children covered by the child support the child's initials (First, middle, last)	deduction ch child you are the le port order involved in Birth year:	\$egal parent of. n this case.	per
4. Qualified additional dependent of List the name and birth year of each children covered by the child support Child's initials (First, middle, last)	deduction ch child you are the laport order involved in Birth year:	\$egal parent of. n this case. ll parent only):	per

E. My Assets			
— ` ′			
			Savings account: \$
Amount in: Checking	ng account: \$		Savings account: \$
If you have additional bank acc	ounts, attach an	additional page d	and check this box.
18. Real Estate (street addre.	ss):		
(City,)	(State)	(ZIP Code)
Purchase Price: \$		_ Amount you	still owe: \$
If you own additional real estat	e, attach an addi	tional page and c	check this box.
19. Current value of: Stocks	: \$		Bonds: \$
20. Vehicles (cars, trucks, va	ıns, motorcycles	s, boats):	
a. Type:	Year:	Model:	Current value: \$
b. Type:	Year:	Model:	Current value: \$
c. Type:	Year:	Model:	Current value: \$
If you own additional vehicles,	attach an additio	onal page and che	eck this box.
F. My Expenses			
(1) House payment or rent:	\$	per	_
(2) Utilities:	\$	per	_
(3) Meals or food:	\$	per	_
(4) Telephone:	\$	per	_
(5) Clothing:	\$	per	_
(6) Cable/satellite T.V.:	\$	per	_
(7) Medical/ Dental:	\$	per	_
(8) Car expenses:	\$	per	_
(9) Other expenses:	\$	per	_ Describe:
(10) Other expenses:	\$	per	_ Describe:
(11) Other expenses:	\$	per	_ Describe:

Form FL-17.324, page 4 of 6

For example: credit cards, de		d money)		
	epartment stores, loan compa	nies, banks, auto loc	ans)	
1) Payable to:	(2) Item or Service			(4) Balance Due
a)			per	\$
b)		. \$	per	\$
c)		\$	per	\$
d)		\$	per	\$
e)		\$	per	\$
f you have additional debts	s, attach an additional page	e and check this be	ox	
	¥		<u> </u>	
H. CURRENT SPOUSE'S	S INCOME (If you are not cu	rrently married, skip	p to [<u>[.</u>]	
1) Job / Title:		(2) Job / Title	:	
Fraga ingama: \$	nor	Grass income	¢	nor
Gross income: \$ Before taxes	(week or month)	Before taxes	\$	_ per (week or month
	per	Net income:	\$	
After taxes	(week or month)	After taxes		(week or month
I. ATTORNEY HELP				
b. 🗌 An att	torney did not help me protoney helped me prepare			b., you must fill in
b. 🗌 An att				b., you must fill in
b. 🗌 An att	torney helped me prepare llowing information.)	e or fill in this pa		
b. An att	torney helped me prepare llowing information.) rganization, if any)	e or fill in this pa	per. (If you check l	orney)
b. An attended An	torney helped me prepare llowing information.) rganization, if any)	e or fill in this pa	per. (If you check be seen all of the seen be seen all of the	orney)
b. An att the fol (Name of attorney or or (Business address of attorney)	torney helped me prepare llowing information.) rganization, if any) orney or organization)	(Attorney's	per. (If you check be seen all of the seen be seen all of the	orney) (ZIP Code)
b. An att the fol (Name of attorney or or (Business address of attorney)	torney helped me prepare llowing information.) rganization, if any) orney or organization)	(Attorney's	P.I.N. # – Ask the atta (State)	orney) (ZIP Code)
b. An att the fol (Name of attorney or or (Business address of attorney)	torney helped me prepare llowing information.) rganization, if any) orney or organization)	(Attorney's	P.I.N. # – Ask the atta (State)	orney) (ZIP Code)
b. An att the fol (Name of attorney or or (Business address of atto (Attorney's phone number)	torney helped me prepare llowing information.) rganization, if any) orney or organization) er – Required)	(Attorney's	P.I.N. # – Ask the atta (State)	orney) (ZIP Code)
b. An att the fol (Name of attorney or or (Business address of attorney)	torney helped me prepare llowing information.) rganization, if any) orney or organization) er – Required)	(Attorney's	P.I.N. # – Ask the atta (State)	orney) (ZIP Code)
b. An att the fol (Name of attorney or or (Business address of atto (Attorney's phone number)	torney helped me prepare llowing information.) rganization, if any) orney or organization) er – Required)	(Attorney's	P.I.N. # – Ask the atta (State)	orney) (ZIP Code)
b. An att the fol (Name of attorney or or (Business address of atto (Attorney's phone number)	torney helped me prepare llowing information.) rganization, if any) orney or organization) er – Required)	(Attorney's	P.I.N. # – Ask the atta (State)	orney) (ZIP Code)

I,	, certify that on		, 20
(Print your name)		(Month &	
I mailed or gave a copy of this form to the oth	er party or the other par	ty's attorn	ey at this address:
(Name of person to whom I delivered or ma	iled it)		
	(7)	<u>(G, ,)</u>	(ZIP Code)
(Person's street address)	(City)	(State)	(ZIP Code)
also certify under penalty of perjury and pur	suant to the laws of the	state of Iov	,
also certify under penalty of perjury and pur	suant to the laws of the ided in it is true and cor	state of Iov	,
I also certify under penalty of perjury and purthis form and that the information I have prov	suant to the laws of the ided in it is true and cor	state of Iovrect.	,
I also certify under penalty of perjury and purchis form and that the information I have prov (Your signature – Required)	suant to the laws of the ided in it is true and cor	state of Iovrect.	va that I have read

Form FL-17.324, page 6 of 6

FL-17.325 AFFIDAVIT OF MAILING NOTICE

PRINT CLEARLY

A. IN THE DISTRICT COURT FOR	COUNTY, IOWA
	y where the Application is filed)
B. Upon the Petition of	Equity case number:
	Affidavit of Mailing Notice (CLERK STAMPS HERE)
PETITIONER (As it is in the Application)	
VS	
RESPONDENT (As it is in the Application)	
C. ATTORNEY HELP	
b.	,
(Name of attorney or organization, if any)	(Attorney's P.I.N. # – Ask the attorney)
(Business address of attorney or organization)	(City) (State) (ZIP Code)
()(Attorney's phone number – required)	()(Attorney's fax number, if there is one)
D. OATH AND SIGNATURE	
	ry and pursuant to the laws of the state of Iowa that
on the day of, 2 affixed, the following paper or papers (check each Notice of Intent to File a Written App Other document (describe): to the other party at his or her last known address	lication for Default Decree
Name:	
Address:	
City:	State: ZIP Code:
My signature:	
Notice to the Applicant: You <i>must</i> file this form at final Decree for Modification of Child Support Only	the district court clerk's office if you ask the court for a by default.
Form FL-17.3	325, page 1 of 1

	PRINT CLEARLY		
A. In the District Court for			County, Iowa
	(County where the Application	n is filed)	
B. UPON THE PETITION OF		Equity ca	se number:
_			
		Applic	tent to File an ation for It Decree
PETITIONER (As it is in the Application)		(CLERK ST	'AMPS HERE)
vs			
vo			
RESPONDENT (As it is in the Application)			
C.			
TO:(Other party's name: first, m	iddle, last)		_
DATE OF NOTICE:			
IM	PORTANT NOTICE		
YOU ARE IN DEFAULT BECAUSE YOU IN THIS CASE. UNLESS YOU NOTICE, A DEFAULT DECREE OF AGAINST YOU WITHOUT A HEA YOU SHOULD SEEK LEGAL ADVI	J ACT WITHIN <u>TEN DA'</u> CHILD SUPPORT MODII RING, AND YOU MAY	<u>YS</u> FROM THE FICATION WILI	DATE OF THIS L BE ENTERED
	Signature		-
Street Address	City	State	ZIP Code
	elephone Number	_	
Instr	uctions for the Applicant:		
 Deliver a copy of this form to the other Complete an Affidavit of Mailing Noti 	party by mail or in-person.		t court clerk's
office. 3) File the original of this form (FL-17.32 4) Keep a copy of each form for your reco		office.	
F	orm FL-17.326, page 1 of 1		

[Court Order June 17, 2008]

REQUEST FOR RELIEF IN AN APPLICATION TO MODIFY CHILD SUPPORT ONLY PRINT CLEARLY A. IN THE DISTRICT COURT FOR _ COUNTY, IOWA (County where the Application was filed) B. UPON THE PETITION OF Equity case number: Request for Relief in an **Application to Modify Child Support Only PETITIONER** (As it is in the application) (CLERK STAMPS HERE) VS **RESPONDENT** (As it is in the application) PERSONAL INFORMATION Mother: (Name) (Present street address) (City) (State) (ZIP Code) (County) (Year of birth) 2. Father: (Name) (City) (ZIP Code) (Present street address) (State) (County) (Year of birth) **3.** Person -- other than a parent -- who is receiving child support in this case: (Name) (Present street address) (ZIP Code) (City) (State)

Form FL-17.327, page 1 of 5

(Year of birth)

(County)

Child support should be <u>raised</u> from S	\$ per month to \$ per r	nonth beginning
on the day of	, 20 for (list the children	and birth year):
First, middle & last initials of each child Year of birth	<u>First, middle & last</u> initials of each child	Year of birth
(1)	(5)	
(2)	(6)	
(3)	(7)	
(4)	(8)	
Child support should be <u>lowered</u> from	m \$ per month to \$ pe	r month beginnin
on the day of	, 20 for (list the children	and birth year):
First, middle & last initials of each child Year of birth	<u>First, middle & last</u> initials of each child	Year of birth
(1)	(5)	
(2)	(6)	
(3)	(7)	
(4)	(8)	
	(8)t to be higher or lower than the Chil his, write the amount you want and per month	d Support explain why.)
Check here if you want child support Guidelines amount. (If you check the (1) Amount requested: \$	to be higher or lower than the Chilais, write the amount you want and a per month Be Guidelines amount:	d Support explain why.)
Check here if you want child support Guidelines amount. (If you check th (1) Amount requested: \$	to be higher or lower than the Chilais, write the amount you want and a per month Be Guidelines amount:	d Support explain why.)
Check here if you want child support Guidelines amount. (If you check the (1) Amount requested: \$	to be higher or lower than the Chil his, write the amount you want and he per month he Guidelines amount: inning on the day of	d Support explain why.)
Check here if you want child support Guidelines amount. (If you check th (1) Amount requested: \$	to be higher or lower than the Chilais, write the amount you want and a per month Be Guidelines amount:	d Support explain why.)
Check here if you want child support Guidelines amount. (If you check the (1) Amount requested: \$	to be higher or lower than the Chil his, write the amount you want and he per month he Guidelines amount: inning on the day of	d Support explain why.) , 20
Check here if you want child support Guidelines amount. (If you check the (1) Amount requested: \$	to be higher or lower than the Chil his, write the amount you want and he per month he Guidelines amount:	d Support explain why.)
Check here if you want child support Guidelines amount. (If you check th (1) Amount requested: \$	to be higher or lower than the Chilais, write the amount you want and a per month the Guidelines amount:	d Support explain why.) , 20 Year of birth

<u>F</u> <u>i</u>	First, middle & last nitials of each child	Year of birth	Parent who will now claim child for the tax deduction
(1)_			
(2)_			
(6) _			
a. There b. A con and it c. A con	urt order currently s should stay the sar	at this time on v says who pays t me. says who pays t	who pays health care expenses. for health care expenses for the child or child for health care expenses for the child or child
a. \square There b. \square A conand it c. \square A conand it \square A conand it \square	e is no court order a urt order currently s should stay the sar urt order currently should be changed	at this time on we says who pays the says who pays the says who pays the tothe following the says of the following the says of the says who pays the says which we say the s	who pays health care expenses. for health care expenses for the child or child for health care expenses for the child or child
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a.	e is no court order a urt order currently should stay the sar urt order currently should be changed should be changed first, middle & last nitials of each child	at this time on was ays who pays the me. says who pays to the following to the following the manner of the best of the following the manner of the following	who pays health care expenses. for health care expenses for the child or child for health care expenses for the child or child g: Parent who should now provide health insurance coverage

7. Court Fees (Check one.)			
a. All court fees should be paid by me.			
b. All court fees should be paid by the of			
c. The other parent and I should pay one			
d. The other parent and I should pay one-	-half of the <u>total</u> cou	rt fees.	
8. Attorney's Fee. (Check one.)			
a. I have no attorney's fees			
b. I will pay my own attorney's fees	C	? - C	
c. I ask that the other parent pay me \$	for all of	rney's fees.	
2. Necessary Documents. I ask that the court recany papers that may be needed to carry out			to each other
10. Other Request for Relief (Attach additional	sheets if necessary.)		
11. Statements of Understanding and Fact (Ch	eck all that apply.)		
a. I have made a full disclosure of my inc	come to the court.		
b. This request for relief addresses all iss		on to Modify Cl	hild Support
Only.	11	•	**
c. I want this Request for Relief to be ap	proved by the court a	and made part o	of the final
order.	,	1	
E. ATTORNEY HELP			
(Check one.) a.			
b. An attorney helped me		s paper. (If you o	check b., you must
fill in the following inform	eation.)		
(Name of attorney or organization, if any)	(Attorney's P.I.I	V. # – Ask the atto	rney)
(Business address of attorney or organization)	(City)	(State)	(ZIP Code)
(2.00.0000 0.00.000 0.)	(0.0)	(212)	(====
	()		
(Attorney's phone number – Required)	(Attorney's fax i	number, if there is	one)
P. FY 17.2	27 4 65		

· •	, certify that on	(Month & day)	, 20
(Print your name)		(Month & day)	(Year
mailed or gave a copy of this form to all	other parties and attorneys	s (list the names):	
I also certify under penalty of perjury and the "Request for Relief" above and it accurates in the Application to Modify Child (judge for approval and filing with the courage) (Your signature -	rately states how I would Support Only. I ask that tt.	like the court to add	dress the esented to a
the "Request for Relief" above and it accur issues in the Application to Modify Child s judge for approval and filing with the cour	rately states how I would Support Only. I ask that tt.	like the court to add his document be pr	dress the esented to a
the "Request for Relief" above and it accurates in the Application to Modify Child studge for approval and filing with the cour	rately states how I would Support Only. I ask that t t. Required) (City – Required)	like the court to add	dress the esented to a e – Required)

FL-17.328 SETTLEMENT AGREEMENT FOR AN APPLICATION TO MODIFY CHILD SUPPORT ONLY

PRINT CLEARLY

A. In the District Court for (Cou	unty where the Application was	filed)	OUNTY, IOWA
3. UPON THE PETITION OF		Equity case nu	mber:
ETITIONER (As it is in the application)	So	ettlement Agreem Application to 1 Child Support	Modify Only
S			
ESPONDENT (As it is in the application)			
Personal Information Mother:			
Mother:	(Name)		
(Present street address)	(City)	(State)	(ZIP Code)
(County)	(Year of bire	ih)	_
Father:	(Name)		
(Present street address)	(City)	(State)	(ZIP Code)
(County)	(Year of birt	(h)	_
Person other than a parent who is rec	ceiving child support in thi	s case:	
(Name)			
(Present street address)	(City)	(State)	(ZIP Code)
(County)	 (Year of birt	(h)	_

Form FL-17.328, page 1 of 6

Child support should be	e <u>raised</u> from \$	per month to \$	per mo	onth beginning
on the day of		_, 20 for <i>(list the</i>	children a	nd birth year):
First, middle & last initials of each child	Year of birth	<u>First, middl</u> <u>initials of ec</u>	e & last ach child	Year of birth
(1)		(5)		
(2)		(6)		
(3)		(7)		
(4)		(8)		
Child support should b	e <u>lowered</u> from \$_	per month to \$_	per 1	nonth beginnin
on the day of		_, 20 for <i>(list the</i>	children a	nd birth year):
First, middle & last initials of each child	<u>Year of birth</u>	<u>First, middl</u> <u>initials of ec</u>		Year of birth
(1)		(5)		
(2)		(6)		
* *		(0)		
(3)		(7)		
(3)(4) Check here if you war	nt child support to	(7) (8) be higher or lower than	the Child	Support
(3)(4) Check here if you war Guidelines amount. (1) Amount requested: \$	nt child support to last this, we have the manner of the m	(7) (8) on the amount you we conth	the Child	Support plain why.)
(3)(4)	nt child support to large this, we have the first per marent than the Guide the stopped beginning	(7) (8) be higher or lower than exite the amount you we conth elines amount:	the Child	Support plain why.)
(3)(4)	nt child support to large this, we have the first per marent than the Guide the stopped beginning	(7) (8) be higher or lower than exite the amount you we conth elines amount:	the Child ant and ex	Support plain why.)
(3)(4)	nt child support to last this, we per marent than the Guide estopped beginning different than the dirth year):	(7)	the Child ant and ex	Support plain why.)
(3)(4)	nt child support to last this, we per merent than the Guide estopped beginning dirth year):	(7)	n the Child ant and ex	Support plain why.) , 20
(3)	nt child support to last child support to last child support to last child support to last child support than the Guide stopped beginning distribution year):	(7)	e & last	Support plain why.) , 20 Year of birth

children and it should state. A court order currently	says who gets t ay the same. says who gets t	he tax dependency deduction for the child or he tax dependency deduction for the child or
children and it should be <u>First, middle & last</u> <u>initials of each child</u>	C	Parent who will
		now claim child for the tax deduction
(1)(2)		
(5)		
		ional sheet with this information – and check this box.
		who pays health care expenses.
b. A court order currently and it should stay the sar	says who pays : me. says who pays :	for health care expenses for the child or children for health care expenses for the child or children
b. A court order currently and it should stay the sarc. A court order currently	says who pays a me. says who pays a I to the followin	for health care expenses for the child or children for health care expenses for the child or children ag: Parent who should now provide
b. A court order currently and it should stay the sar c. A court order currently and it should be changed <i>First, middle & last</i>	says who pays a me. says who pays a I to the followin	for health care expenses for the child or children for health care expenses for the child or children ag: Parent who should now provide
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b. A court order currently and it should stay the sar c. A court order currently and it should be changed First, middle & last initials of each child (1)	says who pays ame. says who pays and to the following and the following are also and the following are attach an additional are attach an additional are attach and the following are attach and the following are attach and additional are attached as a following are attached and additional additional are attached and additional	for health care expenses for the child or children for health care expenses for the child or children ag: Parent who should now provide health insurance coverage

Court Fees (Check one.)
a. All court fees will be paid by the mother.
b. All court fees will be paid by the father.
c. Each parent shall pay one-half of the <u>remaining</u> court fees.
d. Each parent shall pay one-half of the <u>total</u> court fees.
8. Attorney's Fee.
a. Mother's attorney's fees. (Check one.)
(1) Mother has no attorney's fees
(2) Mother will pay her own attorney's fees
(3) Father will pay \$ for Mother's attorney's fees.
h Father's atterney's fees (Check one)
b. Father's attorney's fees. <i>(Check one.)</i> (1) Father has no attorney's fees
(2) Father will pay his own attorney's fees
(3) Mother will pay \$ for Father's attorney's fees.
(-) <u> </u>
Necessary Documents. We will sign and promptly deliver to each other any papers that may be
needed to carry out this agreement.
10. Other Agreements (Attach additional sheets if necessary.)
II. Statements of Understanding and Fact (Check all that apply.)
a. We have made a full disclosure of our income to the court.
b. This Settlement Agreement addresses all issues in the application to modify child support
only.
c. We want this request to be approved by the court and made part of the final order.
E. ATTORNEY HELP
12. Mother (Check one.) a. An attorney did not help me prepare or fill in this paper.
b. An attorney helped me prepare or fill in this paper. (If you check b., you
must fill in the following information.)
(Name of attorney or organization, if any) (Attorney's P.I.N. # – Ask the attorney)
(Business address of attorney or organization) (City) (State) (ZIP Code)
(Dustriess address of altorney or organization) (City) (State) (ZIP Code)

13. Father (Check one.) a. An attorney did not he b. An attorney helped m must fill in the following	e prepare or fil		
(Name of attorney or organization, if any)	(Attorney's I	P.I.N. #-Ask the attor	rney)
(Business address of attorney or organization)	(City)	(State)	(ZIP Code)
	()	1 10.1	
(Attorney's phone number – Required)	(Attorney's f	ax number, if there is	one)
F. OATH AND SIGNATURE			
This Settlement Agreement addresses all issues in We have made a full disclosure of our income to each by the court and made part of the final order.			
Mother's Oath and Signature:			
the "Settlement Agreement" above and it accurately issues in the Application to Modify Child Suppor attorney about this agreement. I am voluntarily document be presented to a Judge for approval and the settlement of the settleme	rt Only. I kno signing this a	ow I have the riggreement. I am	th to talk to an
		16.1.	
Date signed		Mother's printed nar	ne
Father's Oath and Signature:			
I certify under penalty of perjury and pursuant the "Settlement Agreement" above and it accurately issues in the Application to Modify Child Supportationation attorney about this agreement. I am voluntarily document be presented to a Judge for approval and the settlement of the set	y states how I was rt Only. I known signing this a	yould like the cou ow I have the rig greement. I am	rt to address the that to talk to an
		Father's signature	
		Father's printed nan	<u>1e</u>
STOP! If the Child Support Recovery Unite (Cother than a parent receives child support in the below).			

Signature of Person Other than a Parent:	
-	Signature – Person other than parent
Date signed	Printed name
Signature of CSRU Representative:	
	Signature-CSRU representative
Date signed	Printed name